www.moneygram.com/moneyorder
for additional details regarding your Money Order

PLEASE READ REVERSE SIDE

DATE/AMOUNT

2085383208 5 03/07/2019
147 $25.00
RECEIPT
RECIBO
00

KEEP A COPY IF THIS STUB FOR YOUR RECORDS/ MANTENGA UNA COPIA DE ESTE RECIBO PARA SUS ARCHIVOS

R 208538320859

EMPLOYEE

698 (6/18) 500/5000
M 80771-Z

▼DETACH HERE▼

MoneyGram

...e PV 131144883

...rty Vehicle Use Tax Transaction

REV 06 FORM 89
RC CA ED
(R-07/15)

...rmation

City, State, ZIP: PERU IL 613543171

4 Daytime phone: (815) 200 - 7754

5 ☐ SSN or ☐ FEIN:

6 Driver's license no: E256-4239-1707

7 County LA SALLE

Step 2: Complete the seller's information

1 Name: BRIAN T MARCHEWKA

2 Daytime phone: (_____) _____ - _____

3 Address: 21 PLETCHER DR
YORKVILLE, IL 60560

Step 3: Describe the vehicle - Must complete Line 1 even if no tax is due

1 Purchase price: 750.00

2 Odometer reading:

3 Vehicle identification number (VIN): WDBHA23G9WA542073

4 Year: 1998 Make: MERCEDES-BENZ

5 Model: C

Step 4: Mark the ONE box that best describes your transaction *if* your motor vehicle qualifies as exempt from tax, an exception, or a motorcycle or ATV - If Step 4 does not apply, skip to Step 5.

1 Exemption - ***Write $0 on Step 6, Lines 1, 2 and 3***

1a Organization with tax-exempt status - Provide exemption number: E 1a ☐

1b Farm implement or ready-mix concrete truck 1b ☐

1c Rolling stock - Provide certificate of authority number: 1c ☐

1d You were an out-of-state resident; item used outside IL at least 3 months. **Purchase date:** 02 - 15 - 19 1d ☐

1e Estate gift for surviving spouse 1e ☐

2 Exception - ***Write $15 on Step 6, Line 1.*** See RUT-6, Form RUT-50 Reference Guide for Step 6, Lines 2 and 3.

2a Estate gift for beneficiary (**not** surviving spouse) 2a ☐

2b Business reorganization 2b ☐

2c Transferred or purchased from spouse, parent, brother, sister, or child. **Circle one.** 2c ☐

3 Motorcycle or ATV - ***Write $25 on Step 6, Line 1.*** See RUT-6, Form RUT-50 Reference Guide for Step 6, Lines 2 and 3. 3 ☐

Step 5: Mark Table A or Table B for your Illinois Private Party Vehicle Use Tax - If you marked an item in Step 4, skip to Step 6.

Table A or B - See instructions to determine tax amount due and write it on Step 6, Line 1.

If Step 3, Line 1 is **less than $15,000 use Table A** for your Illinois tax due. See instructions. **Table A** ☒

If Step 3, Line 1 is **$15,000 or more use Table B** for your Illinois tax due. See instructions. **Table B** ☐

Step 6: Figure your tax

1 Illinois Private Party Vehicle Use Tax due.	1	25.00
2 Municipal private party vehicle use tax due. See RUT-6, Form RUT-50 Reference Guide.	2	0.00
3 County private party vehicle use tax due. See RUT-6, Form RUT-50 Reference Guide.	3	0.00
4 **Add Lines 1, 2, and 3.**	4	25.00
5 Credit for tax previously paid to the state of _____.	5	0.00
6 Tax due. **Subtract Line 5 from Line 4.** This is your total tax due.	6	25.00

Step 7: Sign here

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete. I understand that the penalty for willfully filing a false return shall be a fine not to exceed $1,000 or imprisonment in a penal institution, other than the penitentiary not to exceed one year, or both fine and imprisonment.

Your signature 3-7-19 Date Co-owner's signature Date

Remittance agent number (if applicable)

This form is authorized as outlined under the tax or fee Act imposing the tax or fee for which this form is filed. Disclosure of this information is required. Failure to provide information may result in this form not being processed and may result in a penalty.

Do not write below this line.

Date received by Illinois state government

GIOVANNI'S
AUTO BODY & SERVICE

1225 WENZEL ROAD
PERU, IL 61354
BUS: 815-220-0848 FAX: 815-220-0848

☆ CODE N-NEW U-USED R-REBUILT

QTY	☆	PART NO. OR DESCRIPTION			SALE	
1		OEM Key Phone			78.	95

Additional Materials from reverse side

Total Parts

Any warranties on the products sold hereby are those made by the manufacturer. The seller (above named dealership) hereby expressly disclaims all warranties, either express or implied including any implied warranty of merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products.

SPECIAL REPAIRS

TOTAL SPECIAL REPAIRS

DATE:

Time Received AM PM

Promised AM PM

Written By:

Cust Order No.

Phone when ready? Yes ☐ No ☐

Name Julia Eichmeier

Address

City/State/Zip

Year/Make/Model

License No.

Odometer

PHONE Bus. Res.

ESTIMATE AMT.

ADD'L AUTH. AMT.

REVISED ESTIMATE

DATE: 9/18

TIME:

APPROVED BY ☐ IN PERSON ☐ PHONE

I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees, permission to operate the car, truck or vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanics lien is hereby acknowledged on above car, truck or vehicle to secure the amount of repairs thereto. You will not be held responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, accident or any other cause beyond your control.

Authorized By

I ACKNOWLEDGE NOTICE AND ORAL APPROVAL OF AN INCREASE IN THE ORIGINAL ESTIMATED PRICE.

(SIGNATURE OR INITIALS)

OPERATION		LAB. CHG.	
Lubrication	☐		
Change Oil	☐		
Change Oil Filter Cart.	☐		
Service Air Cleaner	☐		
Change Trans. Oil	☐		
Adjust Transmission	☐		
Change Diff. Oil	☐		
Pack Front Wheel Brgs.	☐		
Rotate Tires	☐		
Adjust Brakes	☐		
Retain Parts	☐		
Destroy Parts	☐		

OPER NO. — REPAIR ORDER - LABOR INSTRUCTION — INTERNAL

VIN: ENG:

1 Program Key Phone

QTY		SALE	
	GALS. GAS		
	QTS OIL		
	LBS GREASE		
TOTAL GAS OIL GREASE			

BILLING
☐ CASH
☐ CHARGE
☐ INTERNAL
OK'D BY

INTERNAL SUMMARY

ACCT	CHARGE	COST

RECOMMENDED SERVICE:

1.
2.
3.
4.
5.

Total Labor	$ 40.	00
Labor-Body Shop		
Special Repairs		
Parts	$ 78.	95
Tires		
Gas, Oil & Grease		
Paint & Body Shop Materials		
Materials		
Sales Tax	$ 5.	92
Total Amount	124.	87

APPLE PRESS - Peru, IL Gio/wkorder rev.11/12

See back of receipt for your chance to win $1000
ID #: 7K0MJP8MFZ7

Walmart
Save money. Live better.

.....(.815.).224.-.2396.....
.....MANAGER.CORY.RINGLER.....
.....5307.RT..251.....
.....PERU.IL.61354.....
ST#.00796.OP#.006181.TE#.90.TR#.07627
.....TLE.ITEMS.FOLLOW.....
ORDER.NUMBER.0048570018674
LUBE.SERVICE.060538800973.....45.00.X
PZL.ECOBOX...D10..QT...5.0
...5.0.AT..1.FOR..3.95..
OIL.FILTER...000910055004.
AUTO.TIRES...074131796007.....75.00.X
STATE.FEE....060538850389.....2.50.0
AUTO.TIRES...074131796007.....75.00.X
STATE.FEE....060538850389.....2.50.0
AUTO.TIRES...074131796007.....75.00.X
STATE.FEE....060538850389.....2.50.0
AUTO.TIRES...074131796007.....75.00.X
STATE.FEE....060538850389.....2.50.0
ROADHAZARD...060538898913.....10.00.N
ROADHAZARD...060538898913.....10.00.N
ROADHAZARD...060538898913.....10.00.N
ROADHAZARD...060538898913.....10.00.N
TIRE.FEE.....000003700848.....1.50.0
TIRE.FEE.....000003700848.....1.50.0
TIRE.FEE.....000003700848.....1.50.0
TIRE.FEE.....000003700848.....1.50.0
LIFE.WHL.BAL.007874224343.....9.00.N
LIFE.WHL.BAL.007874224343.....9.00.N
LIFE.WHL.BAL.007874224343.....9.00.N
LIFE.WHL.BAL.007874224343.....9.00.N
TOTAL.THIS.CAR.....437.00.....
.....TLE.ITEMS.COMPLETE.....
.....SUBTOTAL....437.00..
.....TAX.1...7.500.%.....25.88..
.....TOTAL....462.88..
.....DEBIT..TEND....462.88..
.....CHANGE.DUE.....0.00..

EFT.DEBIT.....PAY.FROM.PRIMARY
..462.88..TOTAL.PURCHASE
US.DEBIT.....****.****.****.3927..I.0
REF.#.636100248970
NETWORK.ID..0082.APPR.CODE.520008.....

US.DEBIT
AID.A0000000980840
TC.1926B7C12E9F5E0C
*Pin.Verified
TERMINAL.#.SC010685

.....12/26/16.....15:19:39.....
##
####.....DUPLICATE.RECEIPT.....####
##
....TC#.7435.6356.6940.6620.2115.4....

.....12/26/16.....15:19:46.....
Store receipts on your phone. Walmart Pay.

WALMART# 00796
5307 RT. 251
PERU, IL 61354 US
(815)224-2396
LIC#

ion card.

Service Order:

485700 **18674**

U, IL 61354	PHONE# (815)876-7479
DEL BALT	COLOR Silver
AL TIME	SERVICE COMPLETED TIME 2016-12-26 03:14 PM

ion	Service
	45.00
lter - REPLACED	
ervice Oil Check - CHECKED , **Full**	
dditive - NOT APPLICABLE	
ential Fluid - NOT APPLICABLE	
y Check - DECLINED	
fe environment	
m Carpet - COMPLETE	
ressure - Drv Front - CHECKED , **35**	
ressure - Pass Front - CHECKED , **35**	
er Fluid - CHECKED	
Check - Wiper Drv - CHECKED	
Check - Wiper Rear - CHECKED	
ght Check - Drv Low Beam - CHECKED	
ght Check - Pass Low Beam - CHECKED	
ulb Check - Back Sig Drv - CHECKED	
ulb Check - Front Sig Drv - CHECKED	
ulb Check - Rear Brake Drv - CHECKED	
ulb Check - Rear Park Drv - CHECKED	
uel Injection - COMPLETE	
	0.00
Stem - Drv Rear - DECLINED	
pplicable	
Stem - Pass Rear - DECLINED	
pplicable	
ire - Drv Rear - COMPLETE	
ire - Pass Rear - COMPLETE	
Number - Pass Front - M67P MLIR 2716	
Number - Pass Rear - M67P MLIR 3516	
	0.00
Reset - Drv Rear - COMPLETE	
Reset - Pass Rear - COMPLETE	
	40.00
Tire - Drv Rear - COMPLETE	
Tire - Pass Rear - COMPLETE	
ervice Accepted - Drv Rear	
ervice Accepted - Pass Rear	
	6.00
e Tire Accepted - Drv Rear - COMPLETE	
e Tire Accepted - Pass Rear - COMPLETE	
	36.00
e Accepted - Drv Rear - COMPLETE	
e Accepted - Pass Rear - COMPLETE	
r 100 FT-LB	
ar 100 FT-LB	

I do agree and fully understand that my motor vehicle had a low oil level when I brought it to Wal-Mart for an oil change. This was pointed out to me, that I willingly requested Wal-Mart to change the oil. I will not hold Wal-Mart responsible for any damage to my motor vehicle by the low oil level.

SIGNED

DATE

COMMON TECHNICIAN MATTHEW 6273
COURTESY TECHNICIAN DARYL 6800
LOWER BAY TECHNICIAN MATTHEW 6273
QUALITY CONTROL TECH MATTHEW 6273
SERV WRTR GREETER ADAM 6181
THIRD QC TECH BRETT 6633
TIRE TECHNICIAN BRETT 6633
UPPER BAY TECHNICIAN BRETT 6633

HAVE YOUR LUG NUTS RETORQUED AFTER THE FIRST 50 MILES.

WALMART# 00796
5307 RT. 251
PERU, IL 61354 US
(815)224-2396
LIC#

Service Order:

485700 **21258**

DATE	NAME		PHONE#
11-12-2016	**EICKMEIER, JULIA**	**PERU, IL 61354**	**(815)876-7479**
YEAR	MAKE	MODEL	COLOR
2009	**CHEVROLET**	**COBALT**	**Silver**

LICENSE	ODOMETER	CUSTOMER ARRIVAL TIME	SERVICE COMPLETED TIME
E5193844	**149469**	**2016-11-12 01:06 PM**	**2016-11-12 02:09 PM**

Service Description		Service
F.L/HM COMBO BULK		45.00
- Oil - COMPLETE ,**5.0 QT**	- Oil Filter - REPLACED	
- Grease Fittings - COMPLETE ,**0 Ftngs**	- Pre-Service Oil Check - CHECKED , **Full**	
- Oil Pressure - CHECKED	- Oil Additive - NOT APPLICABLE	
- Transmission Fluid - CHECKED	- Differential Fluid - NOT APPLICABLE	
- Power Steering Fluid - CHECKED	- Battery Check - TESTED GOOD	
- Transfer Case Fluid - NOT APPLICABLE	- Vacuum Carpet - COMPLETE	
- Wash Windshield - CHECKED	- Tire Pressure - Drv Front - CHECKED , **35**	
- Tire Pressure - Drv Rear - CHECKED , **35**	- Tire Pressure - Pass Front - CHECKED , **35**	
- Tire Pressure - Pass Rear - CHECKED , **35**	- Washer Fluid - FILLED	
- Wiper Check - Wiper Drv - CHECKED	- Wiper Check - Wiper Pass - CHECKED	
- Wiper Check - Wiper Rear - CHECKED	- Headlight Check - Drv High Beam - CHECKED	
- Headlight Check - Drv Low Beam - CHECKED	- Headlight Check - Pass High Beam - CHECKED	
- Headlight Check - Pass Low Beam - CHECKED	- Minibulb Check - Back Sig Drv - CHECKED	
- Minibulb Check - Back Sig Pass - CHECKED	- Minibulb Check - Front Sig Drv - CHECKED	
- Minibulb Check - Front Sig Pass - CHECKED	- Minibulb Check - Rear Brake Drv - CHECKED	
- Minibulb Check - Rear Brake Pass - CHECKED	- Minibulb Check - Rear Park Drv - CHECKED	
- Minibulb Check - Rear Park Pass - CHECKED		
- Minibulb Check - 3rd Brake Lite - NOT APPLICABLE		
- Lube Fuel Injection - COMPLETE		
AIR FILTERS		0.00
- Air Filter - REPLACED	- Air Filter Check - REPLACED	

Merchandise Description	Quantity	Unit Price	Merchandise
FRAM AIR EG CA9969	1	12.58	12.58
CAST HM EB 5W30 SN	5.0	4.79	Included
FRAM COR9018TLE	1	2.10	Included

Customer Comments

Technician Comments
CHECK ENGINE LIGHT ON PTS
TPMS LIGHT ON PTS
TRQ 18
COR9018 PG59
5W30 5.0 QTS PG52
BODY DAMAGE PTS
RIM DAMAGE PTS

Total (Excluding Tax & Govt. Fees) 57.58

DISCLAIMER

I authorize the stated service to be completed with the necessary materials.
I give permission to operate the vehicle.
I UNDERSTAND:
1. Walmart is not responsible for loss/damage to the vehicle or items left in it
2. Walmart does not inspect tires to determine if they are safe. Only the service on the service order is performed. Tires are not inspected for conditions that may affect safety (tread depth, cuts, punctures, cracking, bulges, and uneven tread wear).
3. Customers should ensure their tires are properly inflated, have tread depth greater than 2/32" in all grooves, and have no cuts, punctures, cracking, bulges, or uneven tread wear.
An express mechanic's lien is hereby acknowledged on the above vehicle to secure the amount of services performed.
Driving conditions will affect the safety and performance of my tires.

11-12-2016

CUSTOMER SIGNATURE DATE

I do agree and fully understand that my motor vehicle had a low oil level when I brought it to Wal-Mart for an oil change. This was pointed out to me, that I willingly requested Wal-Mart to change the oil. I will not hold Wal-Mart responsible for any damage to my motor vehicle by the low oil level.

SIGNED

DATE

AUDITOR: ROBERT 6705
COMMON TECHNICIAN: ETHAN 6669
COURTESY TECHNICIAN: ETHAN 6669
LOWER BAY TECHNICIAN: ANDREW 6753
SERV WRTR GREETER: CARL 6757
UPPER BAY TECHNICIAN: ETHAN 6669

HAVE YOUR LUG NUTS RETORQUED AFTER THE FIRST 50 MILES.

WAL-MART
TIRE & LUBE EXPRESS

STORE #796
5307 RT. 251
PERU IL 61354
(815)224-2396

Julia

06/14/2017 16:57:32

TIRE QUOTE

WAL-MART TIRE & LUBE EXPRESS IS DEDICATED TO PROVIDING EVERY DAY LOW PRICES ON TIRES WITH UNWAIVERING COMMITMENT TO QUALITY INSTALLATION. PLEASE LET US KNOW HOW WE CAN EARN YOUR BUSINESS.

VEHICLE DESCRIPTION

PURCHASE DESCRIPTION	PRICE	EXTENDED PRICE
BEST		
205/50R17 89V DPERF	1 @ 64.00	64.00
Life Time Balance	1 @ 9.00	9.00
Valve Stem	1 @ 3.00	3.00
WARRANTY MILEAGE: 45,000		
ORIGINAL TREAD DEPTH: 9 / 32		76.00

205/50R17 89V DPERF

STATE FEE 2.50
DISPOSAL 1.50

+ TAX

85.00 w/ Tax

Lifetime Balance includes balancing and rotating the covered tire for the life of the tire on the original vehicle it is installed on. Valve Stem includes valve stem installation. The Rubber Manufacture Association recommends the valve stems to be replaced with the tire to prevent tire failure.

FOR SPECIAL ORDER TIRES VISIT www.walmart.com

ALL TIRE PRICES ARE GOOD FOR 30 DAYS FROM DATE OF QUOTE.
IT IS OUR INTENT TO HAVE EVERY ITEM IN STOCK. ON RARE OCCASION, ITEMS MAY NOT BE AVAILABLE.
WE RESERVE THE RIGHT TO LIMIT QUANTITIES. PRICES DO NOT INCLUDE TAXES AND TIRE FEES.

IVCU
ILLINOIS VALLEY CREDIT UNION
1311 Shooting Park Road
Peru, IL 61354
(815) 224-2667
info@ivcu.com
www.ivcu.com

Statement of Account

500

2 952 1 AV 0.378 0.4125 MC 500

JULIA EICKMEIER
952 2830 4TH ST TRLR 13
PERU, IL 61354-3171

1

Member Number:	16178003
Start Date:	07/01/18
End Date:	09/30/18
Page:	1 of 1

AUDIT VERIFICATION REQUEST: PLEASE EXAMINE YOUR STATEMENT CAREFULLY. IF INCORRECT, PLEASE NOTIFY OUR AUDITORS IN WRITING TO: DESMOND & AHERN, 10827 S WESTERN AVE, CHICAGO, IL 60643. IF CORRECT, NO REPLY IS NECESSARY.

LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	1,011.57	0.00

ILLINOIS VALLEY C U
2107 MARQUETTE RD
PERU, IL 61354

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

LATE NOTICE

SECOND NOTICE

CONTACT
BORROW@IVCU.COM OR
CALL 815-224-2667

WWW.IVCU.COM

ILLINOIS VALLEY C U
2107 MARQUETTE RD
PERU, IL 61354

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

LATE NOTICE

CREDIT UNION PHONE	DATE
815-224-2667	12-08-17

TO BRING YOUR ACCOUNT CURRENT, PLEASE PAY THIS

AMOUNT
115.11
PAST DUE

MEMBER NUMBER	NOTE NO.	CURRENT LOAN BALANCE	DATE DUE	DATE OF LAST TRANSACTION	SCHEDULED PAYMENT
16178003	8003	1,615.58	11-15-17	9-14-17	128.97

PLEASE ENCLOSE THIS NOTICE WITH YOUR PAYMENT

LUBE STOP
MORE THAN OIL EXPERTS

No. 12178

Lube Stop #0169
1227 N Main St
Princeton, IL 61356
815-872-0888 www.lubestop.com
03/08/2019 01:54 PM

GIVE US A REVIEW AND LIKE US ON FACEBOOK

eSticker ID
DBW542073

Customer

MS. JULIA EICKMIER (NEW)
20509 2300 NORTH AVE
OHIO, IL 61349
815-200-7754 eickjul@gmail.com

Vehicle

1998 MERCEDES-BENZ C230
ACCT # DBW542073 VIN: WDBHA23G9WA542073
PLATE #: E519384 Present Mileage: 169,527
Next Service Due on 6/6/2019 at 172,527 miles.

Description	Quantity	Lubricant	Part #	Taxable	Price
CASTROL GTX ULTRACLEAN	5.00	GTX5W30BK	X4757	$11.94	$41.93
Lubricant Description: CAST GTX 5W30 BK API-SN+					
SHOP SUPPLIES	1.00			$0.95	$0.95
Extra Charge - Oil Filter	1.00			$3.99	$3.99
Extra oil over 5 units	0.75	GTX5W30BK		$4.48	$4.48
Lubricant Description: CAST GTX 5W30 BK API-SN+					

Non-Taxable

SubTotal	$29.99	$21.36	$51.35
Coupon (VREM7 OIL)			$7.00
Tax(7.000%)			$1.29
TOTAL (VISA)			$45.64

SERVICE CHECK LIST

1. Oil Change.....Complete
2. Oil Filter.....Replaced
3. Drain Plug.....OK
4. Tamper Seal....Applied
5. Chassis Lube...Sealed
6. Wash Wndshld...Yes
7. Air Filter.....Clean
8. PS Fld Lvl.....Safe Level
9. Cool Bottle....Safe Level
10. AutoTransFld...Safe Level
11. Battery Watr...Maint Free
12. Washer Fluid...Filled
13. ReCheck Oil....Safe Level
14. Wiper Blades...OK
15. Tire PressurFront Rear
19. Cabin Air ...Clean
20. Oil Light Re...Yes

Techs: QUISEAN(Upper) MATT(Lower)
JAYCE(Courtesy) JAYCE(Safety)
JAYCE(Cashier)

Please retain this receipt. It will provide a record of the date and mileage for warranty purposes.

Customer Signature

Any claims for faulty workmanship must first be presented to the store manager before any refunds and/or damage reimbursement will be honored. Do not have any work performed on your vehicle without calling the store manager first if you expect reimbursement.

ILLINOIS VALLEY C U
1311 SHOOTING PARK ROAD
PERU, IL 61354

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

LATE NOTICE

SECOND NOTICE

CONTACT
BORROW@IVCU.COM OR
CALL 815-224-2667

WWW.IVCU.COM

ILLINOIS VALLEY C U
1311 SHOOTING PARK ROAD
PERU, IL 61354

LATE NOTICE

CREDIT UNION PHONE	DATE
815-224-2667	6-08-18

TO BRING YOUR ACCOUNT CURRENT, PLEASE PAY THIS

AMOUNT
115.11
PAST DUE

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

MEMBER NUMBER	NOTE NO.	CURRENT LOAN BALANCE	DATE DUE	DATE OF LAST TRANSACTION	SCHEDULED PAYMENT
16178003	8003	1,011.57	5-15-18	3-14-18	128.97

PLEASE ENCLOSE THIS NOTICE WITH YOUR PAYMENT

LATE NOTICE
CREDIT UNION COPY

MEMBER NUMBER	NOTE NO.	TYPE	DATE
16178003	8003	09	6-08-18

DELINQUENT AMOUNT	CURRENT LOAN BALANCE	AMOUNT OF ORIGINAL LOAN
115.11	1,011.57	4,756.00

DUE DATE	DATE OF LAST TRANSACTION	DATE OF ORIGINAL LOAN
5-15-18	3-14-18	12-15-14

PC	CC	NBR COSIGN	SCHEDULED PAYMENT	DATE LAST DATA CHANGE
12	34	00	128.97	5-12-16

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

MEMBER PHONE 815 8767479

NOTICE NO.	MSG. NO.	PAYMENT METHOD	PAYMENT FREQ.	TOTAL PLEDGED AMOUNT	TOTAL SAVINGS
2	2		M		25.01

DT LST 3-14-18

CUID	Region	SEQUENCE NO
17854	I	0021

00038 8810645 001044 001265 00023/00044 FORM CU6007

ILLINOIS VALLEY C U
1311 SHOTTING PARK ROAD
PERU, IL 61354
PERU, IL 61354

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

LATE NOTICE

YOUR LOAN IS IN DEFAULT.
PAYMENT HAS NOT BEEN RECIEVED.

IF YOUR PAYMENT WAS SENT WE THANK YOU.

FIRST CONTACT:
BORROW@IVCU.COM
OR CALL 815-224-2667
IF YOU NEED TO MAKE ARRANGEMENTS. WE ARE HERE TO HELP
WWW.IVCU.COM

ILLINOIS VALLEY C U
1311 SHOTTING PARK ROAD
PERU, IL 61354
PERU, IL 61354

LATE NOTICE

CREDIT UNION PHONE	DATE
815-224-2667	5-25-18

TO BRING YOUR ACCOUNT CURRENT, PLEASE PAY THIS

AMOUNT
115.11
PAST DUE

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

MEMBER NUMBER	NOTE NO.	CURRENT LOAN BALANCE	DATE DUE	DATE OF LAST TRANSACTION	SCHEDULED PAYMENT
16178003	8003	1,011.57	5-15-18	3-14-18	128.97

PLEASE ENCLOSE THIS NOTICE WITH YOUR PAYMENT

LATE NOTICE
CREDIT UNION COPY

MEMBER NUMBER	NOTE NO.	TYPE	DATE
16178003	8003	09	5-25-18

DELINQUENT AMOUNT	CURRENT LOAN BALANCE	AMOUNT OF ORIGINAL LOAN
115.11	1,011.57	4,756.00

DUE DATE	DATE OF LAST TRANSACTION	DATE OF ORIGINAL LOAN
5-15-18	3-14-18	12-15-14

PC	CC	NBR COSIGN	SCHEDULED PAYMENT	DATE LAST DATA CHANGE
12	34	00	128.97	5-12-16

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

MEMBER PHONE 815 8767479

NOTICE NO.	MSG. NO.	PAYMENT METHOD	PAYMENT FREQ.	TOTAL PLEDGED AMOUNT	TOTAL SAVINGS
1	1		M		25.01

DT LST 3-14-18

CUID	Region	SEQUENCE NO
17854	I	0024

00039 8768092 001026 001248 00026/00044 FORM CU6007

IVCU Illinois Valley Credit Union
1311 Shooting Park Rd
Peru, IL 61354
815-224-2666 Fax 815-224-8534

Demand for Payment/Notice of Default
This is a demand. Your failure to act will create consequences.

Your loan is in default which means that all communication must be in **writing**, not a phone call.
borrow@ivcu.com www.ivcu.com loan help text 815-200-6828

Julia Eickmeier and Gordon Pearson
2830 4th St
Lot 13
Peru, IL 61354

Monday, June 18, 2018

Dear Member:

Your loan 16178003 is in default due to a breach of a covenant in the loan.
The breach is failure to make payments as agreed in the loan contract.

You must pay $244.08.
You must make payment immediately within 10 days of the date of this notice.

Failure to pay the amount owed on or before ten days of this notice may result in acceleration of the sums secured note, repossession of collateral secured by this loan or cross collateralized by any other loan and/or civil proceeding. You may surrender the collateral by contacting the lender.

Illinois Valley Credit Union reserves the right to accelerate collection and repossession action immediately for any reason before the full amount owed is received at any time.

Illinois Valley Credit Union
borrow@ivcu.com
815-224-2666 x 250

Appointments necessary to discuss this matter

2009 Chevrolet Cobalt If you have a vehicle which is collateralized or cross collateralized as security to any of all loans from Illinois Valley Credit Union, please remove all personal property from the vehicles prior to repossession, which may occur when you become delinquent. Illinois Valley Credit Union uses **R&R Recovery** to repossess collateral. This cost is approximately $500 and will be added to the amount you owe. You may surrender the collateral and avoid this charge; please bring the collateral to 2107 Marquette Rd. Peru, IL and place the keys in night drop if after business hours. **The vehicle** will be sold within 21 days of repossession.

If you have circumstances you wish to discuss please contact the Credit Union. Email borrow@ivcu.com or mail us at the address above. Appearing at the credit union during regular business hours without an appointment assures that the best and most appropriate person will be unlikely to assist you. Appointments are needed. Your failure to make the payments as specified in the contract will allow us to take actions specified in the promissory note.

If you are injured, or on disability please make a claim on your loan payment protection coverage.

If you have a vehicle, please remove any personal property.

Your loan is in default which means that all communication must be in writing, not a telephone call.
borrow@ivcu.com www.ivcu.com loan help text 815-200-6828

IVCU
www.ivcu.com

ILLINOIS VALLEY CREDIT UNION
2107 Marquette Road
Peru, IL 61354
(815) 224-2667
Touch-tone teller 1-800-399-4794
info@ivcu.com

Statement of Account

337

2 981 1 AV 0.378 0.349 MC 337

JULIA EICKMEIER
981 2830 4TH ST TRLR 13
PERU, IL 61354-3171

1

Member Number:	16178003
Start Date:	01/01/18
End Date:	03/31/18
Page:	1 of 1

LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	1,450.92	1,011.57

LOAN 8003 13.575 <ANNUAL PERCENTAGE RATE>

Date	Amount	Fee	Fin. Charge	Principal Change	Balance	Transaction Description
Jan 01					**1,450.92**	**PREVIOUS BALANCE**
Jan 23	257.94	35.00	18.35	-204.59	1,246.33	PAYMENT
Mar 14	257.94		23.18	-234.76	1,011.57	PAYMENT
Mar 31					**1,011.57**	**NEW BALANCE**

YTD FINANCE CHARGES 41.53
.037192% DAILY PERIODIC RATE

SHARE SUMMARY

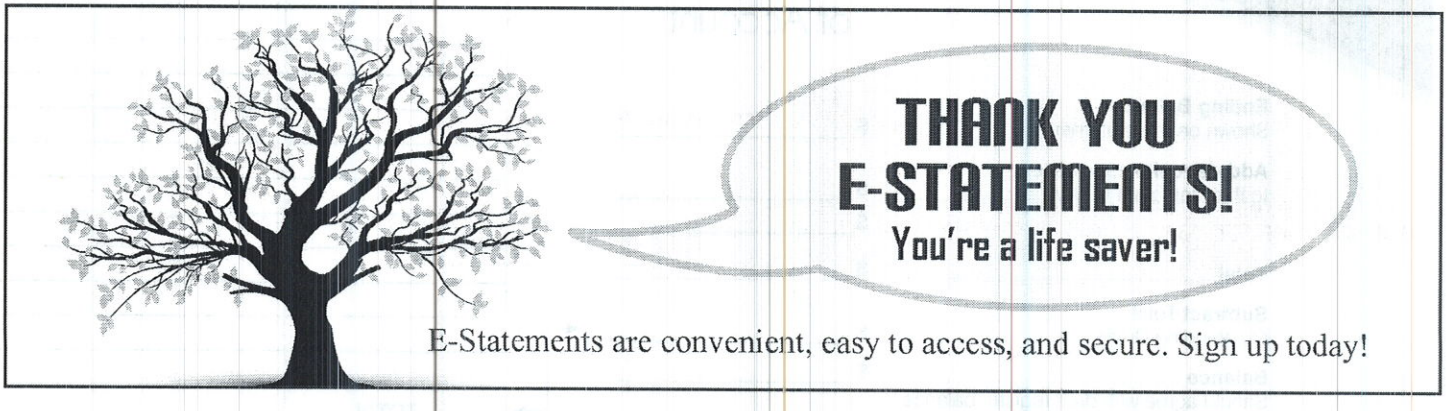
Type	Starting Balance	Total Deposits	Total Withdrawals	Ending Balance
REGULAR SHARES	25.01	0.00	0.00	25.01

REGULAR SHARES

Date	Withdrawal	Deposit	Balance	Transaction Description
Jan 01			**25.01**	**PREVIOUS BALANCE**
Mar 31			**25.01**	**NEW BALANCE**

YEAR-TO-DATE FINANCIAL SUMMARY

DIV/INT PAID	0.00	DIV/INT WITHHOLDING	0.00
MORTGAGE POINTS	0.00	MORTGAGE LATE CHG	0.00
MORTGAGE FINANCE CHG	0.00	OTHER NON-MTG FINANCE CHG	41.53



We encourage Estatements as an environmentally sustainable and superior choice. www.ivcu.com

ILLINOIS INSURANCE IDENTIFICATION CARD

INSURANCE COMPANY
Esurance Property and Casualty
Insurance Company
650 Davis Street
San Francisco, CA 94111
NAIC# 30210

AGENCY/COMPANY ISSUING CARD
Esurance Insurance Services, Inc.
P. O. Box 5250
Sioux Falls, SD 57117-5250

POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE
PAIL-006393983	January 10, 2018	April 30, 2018

YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER
2009	Chevrolet/COBALT LT	1G1AT58H397191834

INSURED NAME AND ADDRESS
JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

ADDITIONAL LISTED DRIVER(S)

Examine policy exclusions carefully. This form does Not constitute any part of your insurance policy.

THIS CARD MUST BE KEPT IN THE INSURED VEHICLE AND PRESENTED UPON DEMAND

Our Contact Information
Customer service and claims center:
1-800-ESURANCE (1-800-378-7262)
Email: support@csr.esurance.com
Web site: www.esurance.com

WARNING: If a named excluded person operates one of the covered vehicles, the liability coverage will be void, meaning that no one on the policy will be insured. Owners of the vehicle and others legally responsible for the acts of the named excluded person will remain fully responsible.

ETA101ST-0000PAIL6393983-20180112-001107-00-0-003-004

copy

IVCU
www.ivcu.com

ILLINOIS VALLEY CREDIT UNION
2107 Marquette Road
Peru, IL 61354
(815) 224-2667
Touch-tone teller 1-800-399-4794
info@ivcu.com

Statement of Account

3 978 1 AV 0.373 0.389 MC 337

337

JULIA EICKMEIER
978 2830 4TH ST TRLR 13
PERU, IL 61354-3171

1

Member Number:	16178003
Start Date:	10/01/17
End Date:	12/31/17
Page:	1 of 1

AS OF JANUARY 2, 2018, OUR OVERDRAFT/NSF FEES WILL INCREASE FROM $24 TO $30 PER ITEM

LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	1,615.58	1,450.92

LOAN 8003 13.575 <ANNUAL PERCENTAGE RATE>

Date	Amount	Fee	Fin. Charge	Principal Change	Balance	Transaction Description
Oct 01					1,615.58	PREVIOUS BALANCE
Dec 20	257.94	35.00	58.28	-164.66	1,450.92	PAYMENT
Dec 31					1,450.92	NEW BALANCE

YTD FINANCE CHARGES 290.21
.037192% DAILY PERIODIC RATE

SHARE SUMMARY

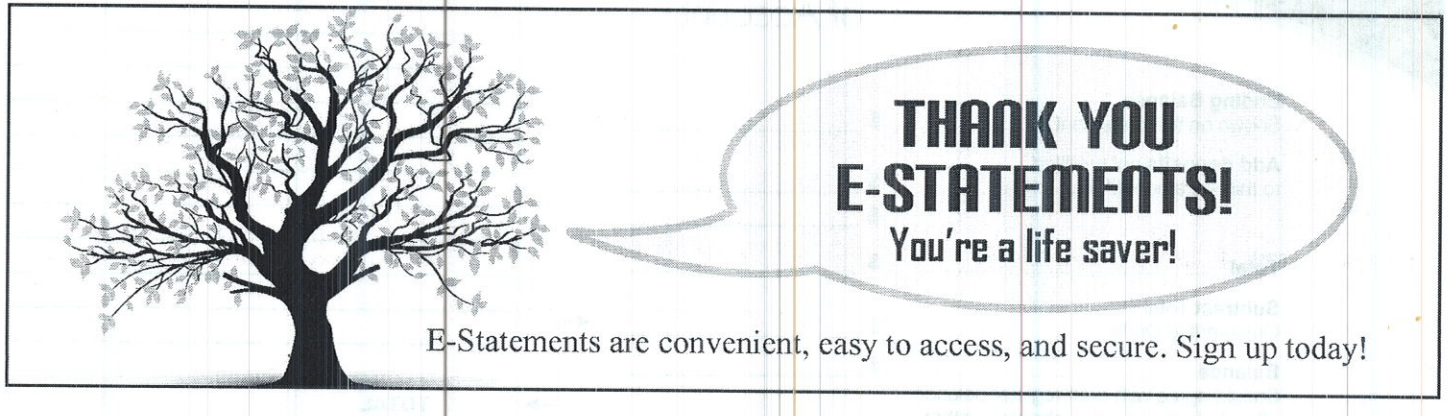
Type	Starting Balance	Total Deposits	Total Withdrawals	Ending Balance
REGULAR SHARES	25.01	0.00	0.00	25.01

REGULAR SHARES

Date	Withdrawal	Deposit	Balance	Transaction Description
Oct 01			25.01	PREVIOUS BALANCE
Dec 31			25.01	NEW BALANCE

YEAR-TO-DATE FINANCIAL SUMMARY

DIV/INT PAID	0.00	DIV/INT WITHHOLDING	0.00
MORTGAGE POINTS	0.00	MORTGAGE LATE CHG	0.00
MORTGAGE FINANCE CHG	0.00	OTHER NON-MTG FINANCE CHG	290.21



We encourage Estatements as an environmentally sustainable and superior choice. www.ivcu.com

Repair Examples

Julia Eickmeier
2830 4th St Trlr 13
Potential Expenses

EXAMPLE

Billing Date:	6/23/17
Account ID:	E505171968
Previous Balance:	$0.00

Account Activity

Date	Invoice No.	Detalis	Charges	Payments
7/23/2016	1	Main Engine Computer	$ 849.75	
	1	Engine	$ 4,352.50	
	1	Towing to Repair Shop	$ 57.50	
	5	Days Rental Car	$ 175.00	
10/31/2016	1	Air Conditioning Unit	$ 1,507.50	
8/31/2016	1	Water pump	$ 495.00	
	1	Towing to Repair Shop	$ 57.50	
	2	Days Rental Car	$ 70.00	
2/14/2016	1	Alternator	$ 677.25	
	1	Towing to Repair Shop	$ 57.50	
4/15/2016	1	Power Window Motor	$ 563.40	
	1	Wiper Motor	$ 516.25	
5/1/2016	1	Transmission	$ 3,302.50	
	1	Towing to Repair Shop	$ 57.50	
	5	Days Rental Car	$ 175.00	
		Totals	$ 12,914.75	$0.00
		Let the policy pay this for you:		$ 12,914.75

Call today so you don't have to pay for these kind of repairs out of pocket.
Example of actual repair costs.
DO NOT PAY
1-877-413-6377

The administrator/Obligor of the vehicle service contract is Interstate National Dealer Services, Inc., 6120 Ferry Rd., NW, Suite 200, Atlanta, GA 30339 or Endurance Dealer Services, 400 Skokie Blvd, Suite 105, Northbrook, IL 60062. All claims must be pre-authorized before repairs are made. Parts of like kind and quality may be used. This is an advertisement to obtain coverage. Endurance Warranty Services is located at 6860 N. Dallas Parkway, Suite 200, Plano, TX 75024-2959

ATTACH FIRST PART TO CERTIFICATE OF TITLE

ILLINOIS SECURE POWER OF ATTORNEY

90506859

WARNING! This Form May Be Used Only When Title Is Physically Held By Lienholder Or When Title Has Been Lost. This Form Must Be Submitted To The State By The Person Exercising Power(s) Of Attorney. Failure To Do So May Result In Fines And/Or Imprisonment.

VEHICLE DESCRIPTION

Year	Make	Model	Body Type	Vehicle Identification Number
2009	CHEVROLET	COBALT LT		1G1AT58H397191834

PART A. Power of Attorney to Disclose Mileage

Federal and State law require that you state the mileage upon transfer of ownership.
Failure to complete or providing a false statement may result in fines and/or imprisonment.

I, JULIA C EICKMEIER and GORDON PEARSON (transferor's name, Print), appoint GIOVANNI ENTERPRISES LLC (transferee's/dealership name, Print) as my attorney-in-fact, to sign all papers and documents required to secure Illinois Title and to disclose the mileage on the title for the vehicle described above, exactly as stated in my following disclosure.

I state that the odometer now reads _____ (no tenths) miles and, to the best of my knowledge, that it reflects the actual mileage unless one of the following statements is checked.

☐ (1) The mileage stated is in excess of its mechanical limits.

☐ (2) The odometer reading is NOT the actual mileage. WARNING – ODOMETER DISCREPANCY.

Julia Eickmeier Mark Pearson
(Transferor's Signature)

JULIA C EICKMEIER GORDON PEARSON
(Printed Name)

2830 4TH
(Transferor's Street Address)

PERU IL 6135
(City, State, Zip Code)

December 15,
(Date of Statement)

(Transferee's Signature)

GIOVANNI ENTERPRISES LLC
(Printed Name)

1225A WENZ
(Transferee's Street Address)

PERU IL 6135
(City, State, Zip Code)

PART B. Power of Attorney to Review Title Documents and Acknowledge Disclosure

(Part B is invalid unless Part A has been completed)

I, _____ (transferee's name, Print), appoint _____ (transferor's name, Print) as my attorney-in-fact, to sign all papers and documents required to secure Illinois Title and to sign the mileage disclosure on the title for the vehicle described above, only if the disclosure is exactly as the disclosure completed below.

(Transferee's Signature)

(Transferee's Printed Name)

(Transferee's Name, Street Address, City, State Zip Code)

Federal and State law require that you state the mileage upon transfer of ownership.
Failure to complete or providing a false statement may result in fines and/or imprisonment.

I, _____ (transferor's/dealership name, Print), state that the odometer now reads _____ (no tenths) miles and, to the best of my knowledge, that it reflects the actual mileage unless one of the following statements is checked.

☐ (1) The mileage stated is in excess of its mechanical limits.

☐ (2) The odometer reading is NOT the actual mileage. WARNING – ODOMETER DISCREPANCY.

(Transferor's Signature)

(Transferor's Printed Name)

(Transferor's Street Address)

(City, State, Zip Code)

(Date of Statement)

PART C. Certification (To Be Completed When Both Parts A and B Have Been Used)

I, _____ (person exercising above powers of attorney, Print), hereby certify that the mileage I have disclosed on the title document is consistent with that provided to me in the above power of attorney. Further, upon examination of the title and any reassignment documents for the vehicle described above, the mileage disclosure I have made on the title pursuant to the power of attorney is greater than that previously stated on the title and reassignment documents. This certification is not intended to create, nor does it create any new or additional liability under Federal or State law.

(Signature)

(Printed Name)

(Street Address)

(City, State, Zip Code)

GIOVANNI ENTERPRISES LLC
1225A WENZEL ROAD
PERU IL 61354
(815) 220-0848

Date: December 15, 2014 *** * BILL OF SALE * ***

Purchaser : JULIA C EICKMEIER
Co-Purchaser: GORDON PEARSON
Address : 2830 4TH ST #13
City St. Zip: PERU IL 61354
Home Phone #: (815) 876-7479

Dri Lic: DOB: / /
Dri Lic: DOB: / /
Soc Sec:
Soc Sec:
Work Phone #:

Vehicle Purchased: Stock #: Salesperson: House

N/U	Year	Make	Model	Body Style	Color	Vin	Cyl	Miles
Used	2009	CHEVROLET	COBALT LT		SILVE	1G1AT58H397191834		104404

Trade-In #1
Year : 0000
Make :
Model:
C.C. :
Trade-In Lienholder:
Stock #:
Vin #:
Color:
Miles:
Cyl. :

Trade-In #2
Year :
Make :
Model:
C.C. :
Stock #:
Vin #:
Color:
Miles:
Cyl. :

Lienholder Information:
ILLINOIS VALEEY C/U
2107 MARQUETTE RD
PERU,IL 61354
Amount Financed: 4,756.00 @ 13.575 APR
Number Payments: 48 @ 128.95 Monthly

Selling Price....:	6,495.00
Chemical Package.:	N/A
Accessories.....:	N/A
Trade Allowance..:	N/A
Dealer Discount..:	N/A
Documentry Fee...:	150.00
Taxable Amount...:	6,645.00
Sales Tax.....:	415.00
License & Title..:	196.00
Service Contract.:	N/A
Other Charges....:	N/A
TOTAL CASH PRICE.:	**7,256.00**
Trade-In Payoff..:	N/A
Rebate Amount....:	N/A
Cash Downpayment.:	2,500.00
TOTAL AMOUNT DUE.:	**4,756.00**
Cash On Delivery.:	0.00
UNPAID BALANCE...:	**4,756.00**
Credit Insurance.:	N/A
GAP Program Cost.:	N/A

Purchaser agrees that this order includes all of the terms and conditions hereof, that this order cancels and supercedes any prior agreement written or oral. This order shall not become binding until accepted by the DEALER or his authorized representative.
I have read the face of this order and agree to this purchase price. I hereby certify that I am 18 years of age or older.

DEALER PROVIDES NO INSURANCE:
If financed buyer agrees to furnish full coverage insurance.

(_____) SOLD AS IS:
I MAKE THIS PURCHASE KNOWINGLY WITHOUT ANY GUARANTEE, EXPRESSED OR IMPLIED, BY THIS DEALER OR HIS AUTHORIZED AGENT.

Purchaser Signature — Date 12-15-14
Dealer Signature — Date 12-15-14
Gordon Pearson
Co-Purchaser Signature — Date 12-15-14

Temporary Registration Plate
CUSTOMER'S COPY

TRP PLATE #
743R795

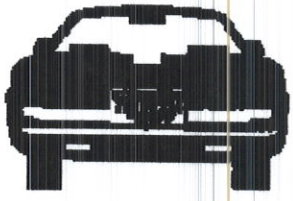
AGENTS #
DL1872
DL

Agency: Giovanni Enterprises, LLC
Date Issued: 12/15/2014

Expiration Date: 3/15/2015
Name of First Purchaser: JULIA EICKMEIER
Drivers License #: N/A
Address: 2830 4TH ST #13
PERU, Illinois 61354
Name of Second Purchaser: GORDON PEARSON
Drivers License #: N/A
Vehicle Year: 2009
VIN #: 1G1AT58H397191834
Make: Chevrolet
Model: COBALT
Fee Paid: $196.00

Signature of Issuing Agent:
Confirmation #: 17204451

Application and Fee
Forwarded to
Secretary of State
Springfield, Illinois



TRP Instructions

1. Affix Temporary Registration Plate to plate area on rear of car.
2. Upon receipt of License Plates, remove Temporary Registration Plate and attach License Plates. Temporary Registration Plate must be destroyed and discarded.
3. Improper display of the Temporary Registration Permit is a violation of the Illinois Vehicle Code and you may be subject to fines and penalties.
4. In case of loss or theft of Temporary Registration Plate, you should immediatley contact your local law enforcement agency and report the loss or theft, then go to a Secretary of State Facility to receive a replacement.

THE CUSTOMER RECEIPT MUST BE CARRIED IN THE VEHICLE AS LONG AS THE TRP PLATE IS BEING DISPLAYED.

1. **Type of Transaction(s):**

- [x] Title and Plates
- [ ] Title and Transfer
- [ ] Title Only
- [ ] Duplicate Title
- [ ] Corrected Title
- [ ] Salvage Certificate
- [ ] Junking Certificate
- [ ] Plates Only
- [ ] Sticker Only
- [ ] Transfer Only
- [ ] Corrected ID Card
- [ ] Duplicate ID Card
- [ ] Single Plate Replacement
- [ ] Set of Plates Replacement
- [ ] Sticker Replacement
- [ ] Reclass of License Plates
- [ ] Resale of License Plates
- [ ] Other:

2. Current Plate Number

3. Plate Type Requested: Passenger

4. Exp. Month Year

Do not write in Validation Area.

5. **OWNER INFORMATION**

First: JULIA C | Last: EICKMEIER | Middle:

First: GORDON | Last: PEARSON | Middle:

Residence/Business Street Address: 2830 4TH ST #13

City: PERU | ZIP: IL 61354

0760689558

6. Owner 1 DL/FEIN #

Owner 2 DL/FEIN #

7. **VEHICLE INFORMATION**

Vehicle Identification Number (VIN): 1G1AT58H397191834

Year	Make	Model	Body Style	Color
2009	CHEVROLET	COBALT LT		SILVER

8. Purchase Date: 12 / 15 / 14 (Month Day Year) — New [ ] Used [x]

9. Current Odometer Reading (No Tenths): 104404
- [ ] Actual
- [ ] Not Actual
- [ ] In Excess of Mechanical Limits
- [ ] 10 years or older (mileage not required)

Rebuilt [ ] Flood [ ] Other Branded Title [ ] State ____ MCY C.C. Mobile Home Sq. Ft. Rental [ ] Leased [ ]

Check if G.V.W.R. over 16,000 pounds (odometer reading not required) Yes [ ]

Gross Weight (RV, RT, TRK, BUS, TRLR) For Hire [ ] # of Axles

10. Surrender Title Number and State: # State:

11. File Number

12. Unit Number

13. **MAIL TITLE TO** *(IF DIFFERENT THAN ABOVE)*

Name

Street Address

City State ZIP

14. **VEHICLE INSURANCE INFORMATION** *(TRAILERS EXEMPT)*

Insurance Company Name *(Do not list agent)*

Policy Number

Expiration Date / /

15. **FIRST LIENHOLDER**

Name: ILLINOIS VALEEY C/U

Street Address: 2107 MARQUETTE RD

City: PERU,IL 61354 State ZIP

16. **SECOND LIENHOLDER**

Name

Street Address

City State ZIP

17. **TRANSFER INFORMATION**

Year | Make/Model

VIN

18. **SELLER'S INFORMATION** *(INDIVIDUAL OR DEALERSHIP)*

Name: GIOVANNI ENTERPRISES LLC Dealer #: 1872

Address: 1225A WENZEL ROAD PERU IL 61354

19. **REASON(S) FOR CORRECTED OR DUPLICATE TITLE**

State all reasons for corrections or duplication.

20. **REASON FOR REPLACEMENT PLATES/STICKER**

- [ ] Lost
- [ ] Stolen
- [ ] Destroyed
- [ ] Requesting a Different Number
- [ ] Respacing

21. **WHEN REPLACING PLATES, YOU MUST CHECK ONE:**

- [ ] I wish to be issued a random-number plate.
- [ ] I wish to retain my current plate number.

22. **BENEFICIARY INFORMATION**

Name

Address

ZIP Country

23. Daytime Phone Number (optional): (815) 876-7479

24. Signature(s):

1. Julia Eickmeier

25. **AUDITOR'S USE ONLY**

TRP NUMBER: 743R795

Tax Form Number

$ 196.00

Circle Quarter:

*Circle All Attachments:

POA, Small Estate, Affidavit, Affirmation,

STAPLE HERE

Giovannis Auto
815-780-0563

2009 Chevrolet Cobalt

Stock Number: A424
VIN: 1G1AT58H397191834
Engine: I4 2.2L I4

Trim: LT 4dr Sedan
Mileage: 104,404

Color: SILVER
Fuel Type: Gasoline
MPG: 24 city / 33 hwy

Description

Options

Air Filtration, Airbag Deactivation - Occupant Sensing Passenger, Anti-Theft System - Alarm With Engine Immobilizer, Anti-Theft System - Audio Security System, Audio System Features - Radio Data System, Auxiliary Audio Input - Jack, Battery - Maintenance-Free, Body Side Moldings - Body-Color, Cargo Area Light, Center Console - Front Console With Armrest And Storage, Child Safety Locks, Child Seat Anchors - Latch System, Cupholders - Front And Rear, Daytime Running Lights, Door Handle Color - Body-Color, Driver Seat - Height Adjustable, Driver Seat Manual Adjustments - 4, Driver Seat Manual Adjustments - Lumbar, Driver Seat Manual Adjustments - Recline, Emergency Interior Trunk Release, Exhaust Tip Color - Stainless-Steel, Exterior Mirrors - Power, Floor Mat Material - Carpet, Floor Mats - Front And Rear, Front Air Conditioning, Front Air Conditioning Zones - Single, Front Airbags - Dual, Front Brakes - Disc, Front Headrests - 2, Front Headrests - Driver Seat Active Head Restraint, Front Headrests - Height Adjustable, Front Headrests - Passenger Seat Active Head Restraint, Front Seat Type - Bucket, Front Shock Type - Gas Shock Absorbers, Front Spring Type - Coil Springs, Front Wipers - Intermittent, Front Wipers - Speed Sensitive, Grille Color - Black, Headlights - Auto On/Off, Mirror Color - Body-Color, Mp3 Player - Cd Mp3 Playback, Multi-Function Remote - Keyless Entry, Multi-Function Remote - Trunk Release, Multi-Functional Information Center, Passenger Seat Manual Adjustments - Recline, Power Door Locks - Remote, Power Outlet(S) - Two 12v, Power Steering, Power Windows, Radio - Am/Fm, Rear Brakes - Drum, Rear Center Seatbelt - 3-Point, Rear Headrests - 2, Rear Headrests - Height Adjustable, Rear Seat Type - 60-40 Split Bench, Rear Shock Type - Gas Shock Absorbers, Rear Spring Type - Coil Springs, Retained Accessory Power, Satellite Communications - Onstar, Satellite Radio - Xm, Side Curtain Airbags - Front And Rear, Solar-Tinted Glass, Spare Tire Kit - Inflator Kit, Speed Sensitive Volume Control, Stability Control, Steering Wheel - Tilt-Adjustable, Steering Wheel Trim - Urethane, Storage - Seatback, Tachometer, Tire Pressure Monitoring System, Tire Type - All Season, Total Number Of Speakers - 4, Traction Control, Upholstery - Sport Cloth, Vanity Mirrors - Dual, Warnings And Reminders - Lamp Failure, Low Fuel, Engine Oil, Coolant, Wheel Type - Steel, Window Defogger - Rear, Window Defogger - Side

Price:

Was: ~~$7,459~~

Special: $6,995

Information deemed reliable, but not guaranteed. Interested parties should confirm all data before relying on it to make a purchase decision. All prices and specifications are subject to change without notice. Prices may not include additional fees such as government fees and taxes, title and registration fees, finance charges, dealer preparation fees, processing fees, and emission testing and compliance charges.

Visit us online at
www.giovannisautoil.com
Powered by Carsforsale.com

SCAN ME!

TM

ATTACH FIRST PART TO CERTIFICATE OF TITLE

ILLINOIS SECURE POWER OF ATTORNEY

90506859

WARNING! This Form May Be Used Only When Title Is Physically Held By Lienholder Or When Title Has Been Lost. This Form Must Be Submitted To The State By The Person Exercising Power(s) Of Attorney. Failure To Do So May Result In Fines And/Or Imprisonment.

VEHICLE DESCRIPTION

Year	Make	Model	Body Type	Vehicle Identification Number
2009	CHEVROLET	COBALT LT		1G1AT58H397191834

PART A. Power of Attorney to Disclose Mileage

Federal and State law require that you state the mileage upon transfer of ownership.
Failure to complete or providing a false statement may result in fines and/or imprisonment.

I, JULIA C EICKMEIER and GORDON PEARSON (transferor's name, Print), appoint GIOVANNI ENTERPRISES LLC (transferee's/dealership name, Print) as my attorney-in-fact, to sign all papers and documents required to secure Illinois Title and to disclose the mileage on the title for the vehicle described above, exactly as stated in my following disclosure.

I state that the odometer now reads _____ (no tenths) miles and, to the best of my knowledge, that it reflects the actual mileage unless one of the following statements is checked.

☐ (1) The mileage stated is in excess of its mechanical limits.

☐ (2) The odometer reading is NOT the actual mileage. WARNING – ODOMETER DISCREPANCY.

Julia Eickmeier Gordy Pearson (Transferor's Signature)	(Transferee's Signature)
JULIA C EICKMEIER GORDON PEARSON (Printed Name)	GIOVANNI ENTER (Printed Name)
2830 4TH (Transferor's Street Address)	1225A WENZ (Transferee's Street Address)
PERU IL 6135 (City, State, Zip Code)	PERU IL 6135 (City, State, Zip Code)
December 15, (Date of Statement)	

PART B. Power of Attorney to Review Title Documents and Acknowledge Disclosure

(Part B is invalid unless Part A has been completed)

I, _____ (transferee's name, Print), appoint _____ (transferor's name, Print) as my attorney-in-fact, to sign all papers and documents required to secure Illinois Title and to sign the mileage disclosure on the title for the vehicle described above, only if the disclosure is exactly as the disclosure completed below.

(Transferee's Signature)	(Transferee's Printed Name)

(Transferee's Name, Street Address, City, State Zip Code)

Federal and State law require that you state the mileage upon transfer of ownership.
Failure to complete or providing a false statement may result in fines and/or imprisonment.

I, _____ (transferor's/dealership name, Print), state that the odometer now reads _____ (no tenths) miles and, to the best of my knowledge, that it reflects the actual mileage unless one of the following statements is checked.

☐ (1) The mileage stated is in excess of its mechanical limits.

☐ (2) The odometer reading is NOT the actual mileage. WARNING – ODOMETER DISCREPANCY.

(Transferor's Signature)	(Transferor's Printed Name)
(Transferor's Street Address)	(City, State, Zip Code)
(Date of Statement)	

PART C. Certification (To Be Completed When Both Parts A and B Have Been Used)

I, _____ (person exercising above powers of attorney, Print), hereby certify that the mileage I have disclosed on the title document is consistent with that provided to me in the above power of attorney. Further, upon examination of the title and any reassignment documents for the vehicle described above, the mileage disclosure I have made on the title pursuant to the power of attorney is greater than that previously stated on the title and reassignment documents. This certification is not intended to create, nor does it create any new or additional liability under Federal or State law.

(Signature)	(Printed Name)
(Street Address)	(City, State, Zip Code)

Auditor Test

GIOVANNI ENTERPRISES LLC
1225A WENZEL ROAD
PERU IL 61354
(815) 220-0848

Date: December 15, 2014 ** BILL OF SALE **

Purchaser :	JULIA C EICKMEIER	Dri Lic:	DOB: / /
Co-Purchaser:	GORDON PEARSON	Dri Lic:	DOB: / /
Address :	2830 4TH ST #13	Soc Sec:	
City St. Zip:	PERU IL 61354	Soc Sec:	
Home Phone #:	(815) 876-7479	Work Phone #:	

Vehicle Purchased: Stock #: Salesperson: House

N/U	Year	Make	Model	Body Style	Color	Vin	Cyl	Miles
Used	2009	CHEVROLET	COBALT LT		SILVE	1G1AT58H397191834		104404

Trade-In #1 Stock #:

Selling Price....:	6,495.00
mical Package.:	N/A
essories.....:	N/A
de Allowance..:	N/A
ler Discount..:	N/A
umentry Fee...:	150.00
able Amount...:	6,645.00
les Tax.....:	415.00
cense & Title..:	196.00
rvice Contract.:	N/A
her Charges....:	N/A
TAL CASH PRICE.:	7,256.00
ade-In Payoff..:	N/A
bate Amount....:	N/A
sh Downpayment.:	2,500.00
TAL AMOUNT DUE.:	4,756.00
sh On Delivery.:	0.00
PAID BALANCE...:	4,756.00
edit Insurance.:	N/A
P Program Cost.:	N/A

nd conditions hereof, that
n or oral. This order shall
rized representative.
e price. I hereby certify

SSED OR IMPLIED, BY THIS

ture Date 12-15-14

ODOMETER DISCLOSURE STATEMENT
(Non-Leased)

FEDERAL AND STATE LAW REQUIRES THAT YOU STATE THE ODOMETER MILEAGE UPON TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE OR AN INACCURATE STATEMENT MAY MAKE YOU LIABLE FOR DAMAGES TO YOUR TRANSFEREE, FOR ATTORNEY FEES, AND FOR CIVIL OR CRIMINAL PENALTIES, INCLUDING FINES AND/OR IMPRISONMENT, PURSUANT TO SECTIONS 409, 412, AND 413 OF THE MOTOR VEHICLE INFORMATION AND COST SAVINGS ACT OF 1972 (PUB. L. 92-513, AS AMENDED BY PUB. L. 94-364).

I, GIOVANNI ENTERPRISES LLC (TRANSFEROR'S NAME - PRINT), STATE THAT THE ODOMETER NOW READS 104404 (NO TENTHS) MILES/KILOMETERS AND TO THE BEST OF MY KNOWLEDGE THAT IT REFLECTS THE ACTUAL MILEAGE OF THE VEHICLE DESCRIBED BELOW, UNLESS ONE OF THE FOLLOWING STATEMENTS IS CHECKED.

CHECK ONE BOX ONLY.

☐ (1) I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE ODOMETER READING REFLECTS THE AMOUNT OF MILEAGE IN EXCESS OF ITS MECHANICAL LIMITS.

☐ (2) I HEREBY CERTIFY THAT THE ODOMETER READING IS NOT THE ACTUAL MILEAGE. **WARNING ODOMETER DISCREPANCY.**

YEAR	MAKE	BODY TYPE	MODEL
2009	CHEVROLET		COBALT LT
VEHICLE IDENTIFICATION NUMBER			
1G1AT58H397191834			

TRANSFEROR'S SIGNATURE Agent

PRINTED NAME GIOVANNI ENTERPRISES LLC

TRANSFEROR'S ADDRESS 1225A WENZEL ROAD (STREET)
PERU (CITY) IL (STATE) 61354 (ZIP)

DATE OF STATEMENT December 15, 2014

TRANSFEREE'S SIGNATURE

PRINTED NAME JULIA C EICKMEIER

TRANSFEREE'S ADDRESS 2830 4TH ST #13 (STREET)
PERU (CITY) IL (STATE) 61354 (ZIP)

REV. 3/89 TRIPLICATE - COPY STYLE 2

Illinois Department of Revenue

ST-556 Sales Tax Transaction Return

(R-10/13) (For Vehicles, Watercraft, Aircraft, Trailers, and Mobile Homes)

Do not write above this line. NS CA ED RC TL

Tax return no.: 14749568-3
Account ID: 3964-8680
Taxable location no.: 050-0019-1 001
Taxable location name: Peru
Dealer's license no.: DL 1872
Rev: 05
Form: 016

GIOVANNI'S AUTO BODY & REPAIR
GIOVANNI ENTERPRISES, LLC
1225 WENZEL RD
PERU IL 61354-1135

(815) 220-0848

Electronic filing is FREE when you use MyTax Illinois at **tax.illinois.gov**

1 Write the buyer's name and address

Name(s) JULIA C EICKMEIER and GORDON PEARSON

Street 2830 4TH ST #13 City PERU State IL ZIP 61354

2 Describe the item sold

☐ A Vehicle ☐ B Watercraft ☐ C Aircraft
☒ D Trailer ☐ E Mobile Home ☐ F _____

☐ New ☒ Used

Identification no. 1G1AT58H397191834

Year 2009 Make CHEVROLET

Body style and model COBALT LT

3 Write the date of delivery 12 / 15 / 2014 (Month Day Year)

(This return is due no later than 20 days after the date of delivery.)

4 Describe the trade-in, if any

Item traded in _____

Identification no. _____

Year 0000 Make _____

Body style and model _____

ATTACH PAYMENT HERE

5 Exempt or sale to nonresident

If so, check the correct box below, **and** see instructions for Section 6.

☐ A Nonresident buyer (**NOT** an out-of-state dealer) **See instructions.** drive-away permit no./lic. plate no. _____ state _____

☐ B Sold for resale to a **DEALER** (Write either the Illinois dealer's Account ID or "Out-of-state dealer")

☐ C Exempt organization (government, school, religious, or charitable) tax-exempt no. E- _____

☐ D Sold to an interstate carrier for hire for use as rolling stock Certificate of authority no. _____

☐ E Sold for rental use buyer's account ID no. _____

☐ F Other (describe) _____

6 Write the price, and figure the tax (Round to nearest dollar)

You must complete Lines 1 and 2 even if no tax is due.

1	Total price (include accessories, federal excise taxes, freight and labor, dealer preparation, documentary fees, and dealer-reimbursed rebates or incentives)	6645.00
2	Total trade-in credit or value	0.00
3	Amount subject to tax [Line 1 - Line 2]	6645.00
4	Tax [Line 3 X .0625] (if you made this sale from a temporary sales location, see the instructions.)	415.00
5	Use tax for certain districts - (see instructions) **Do not report home rule use tax below.**	
	a. County _____	
	b. City _____	
	c. Township _____	0.00
6	Total tax [Line 4 + Line 5]	415.00
7	Retailer's allowance if filed on time [Line 6 X .0175]	7.00
8	Net tax due [Line 6 - Line 7]	408.00
9	Prior overpayment (see instructions)	0.00
10	Credit for previously paid tax. By signing this return, I affirm that I meet all requirements to claim this credit. (see instructions) Tax return no.: _____	0.00
11	Excess tax collected	0.00
12	Total tax due [Line 8 - Line 9 - Line 10 + Line 11]	408.00
13	Credit memorandum (see instructions)	0.00
14	Amount due [Line 12 - Line 13]	408.00

Dealer's check no. _____

Under penalties of perjury, we state that we have examined this return, including any schedules and statements, and to the best of our knowledge, it is true, correct, and complete. If the seller has taken a qualified trade-in, we also state that the buyer has properly assigned and surrendered the title of the trade-in to the seller.

Signature of buyer(s) _____ Date 12-15-14
Signature of seller _____ Date 12/15/2014

This form is authorized as outlined by the Illinois tax laws and the Illinois Vehicle Code. Disclosure of this information is REQUIRED. Failure to provide information could result in penalties. This form has been approved by the Forms Management Center.

Do not write below this line.
Date received by Illinois state government

P-000285

1. **Type of Transaction(s):**

- [x] Title and Plates
- [ ] Title and Transfer
- [ ] Title Only
- [ ] Duplicate Title
- [ ] Corrected Title
- [ ] Salvage Certificate
- [ ] Junking Certificate
- [ ] Plates Only
- [ ] Sticker Only
- [ ] Transfer Only
- [ ] Corrected ID Card
- [ ] Duplicate ID Card
- [ ] Single Plate Replacement
- [ ] Set of Plates Replacement
- [ ] Sticker Replacement
- [ ] Reclass of License Plates
- [ ] Resale of License Plates
- [ ] Other:

2. Current Plate Number

3. Plate Type Requested: Passenger

4. Exp. Month Year

Do not write in Validation Area.

5. OWNER INFORMATION

First	Last	Middle
JULIA C	EICKMEIER	
GORDON	PEARSON	

Residence/Business Street Address: 2830 4TH ST #13

City: PERU ZIP: IL 61354

0760689558

6. Owner 1 DL/FEIN #

Owner 2 DL/FEIN #

7. VEHICLE INFORMATION

Vehicle Identification Number (VIN): 1G1AT58H397191834

Year	Make	Model	Body Style	Color
2009	CHEVROLET	COBALT LT		SILVER

8. Purchase Date: 12 / 15 / 14 (Month Day Year) New [ ] Used [x]

9. Current Odometer Reading (No Tenths): 104404

[ ] Actual [ ] Not Actual [ ] In Excess of Mechanical Limits [ ] 10 years or older (mileage not required)

Rebuilt [ ] Flood [ ] Other Branded Title [ ] State _____ MCY C.C. Mobile Home Sq. Ft. Rental [ ] Leased [ ]

Check if G.V.W.R. over 16,000 pounds (odometer reading not required) Yes [ ]

Gross Weight (RV, RT, TRK, BUS, TRLR) For Hire [ ] # of Axles

10. Surrender Title Number and State: # State:

11. File Number

12. Unit Number

13. MAIL TITLE TO *(IF DIFFERENT THAN ABOVE)*

Name

Street Address

City State ZIP

14. VEHICLE INSURANCE INFORMATION *(TRAILERS EXEMPT)*

Insurance Company Name *(Do not list agent)*

Policy Number

Expiration Date / /

15. FIRST LIENHOLDER

Name: ILLINOIS VALEEY C/U

Street Address: 2107 MARQUETTE RD

City: PERU, IL 61354 State ZIP

16. SECOND LIENHOLDER

Name

Street Address

City State ZIP

17. TRANSFER INFORMATION

Year Make/Model

VIN

18. SELLER'S INFORMATION *(INDIVIDUAL OR DEALERSHIP)*

Name: GIOVANNI ENTERPRISES LLC Dealer #: 1872

Address: 1225A WENZEL ROAD PERU IL 61354

19. REASON(S) FOR CORRECTED OR DUPLICATE TITLE

State all reasons for corrections or duplication.

20. REASON FOR REPLACEMENT PLATES/STICKER

[ ] Lost [ ] Stolen [ ] Destroyed

[ ] Requesting a Different Number [ ] Respacing

21. WHEN REPLACING PLATES, YOU MUST CHECK ONE:

[ ] I wish to be issued a random-number plate.

[ ] I wish to retain my current plate number.

22. BENEFICIARY INFORMATION

Name _____

Address _____

ZIP _____ Country _____

25. AUDITOR'S USE ONLY

TRP NUMBER: 743R795

Tax Form Number

$ 196.00

Circle Quarter: 1st 2nd 3rd 4th

23. Daytime Phone Number (optional): (815) 876-7479

24. Signature(s):

1. Julia Eickmeier

Circle All Attachments:

POA, Small Estate, Affidavit, Affirmation, Loan/Lease Agreement, Lien Release.

STAPLE HERE

Temporary Registration Plate
CUSTOMER'S COPY

TRP PLATE #
743R795

AGENTS #
DL1872
DL

Agency: Giovanni Enterprises, LLC
Date Issued: 12/15/2014

Expiration Date: 3/15/2015
Name of First Purchaser: JULIA EICKMEIER
Drivers License #: N/A
Address: 2830 4TH ST #13
PERU, Illinois 61354
Name of Second Purchaser: GORDON PEARSON
Drivers License #: N/A
Vehicle Year: 2009
VIN #: 1G1AT58H397191834
Make: Chevrolet
Model: COBALT
Fee Paid: $196.00

Signature of Issuing Agent:
Confirmation #: 17204451

Application and Fee
Forwarded to
Secretary of State
Springfield, Illinois

TRP Instructions

1. Affix Temporary Registration Plate to plate area on rear of car.
2. Upon receipt of License Plates, remove Temporary Registration Plate and attach License Plates. Temporary Registration Plate must be destroyed and discarded.
3. Improper display of the Temporary Registration Permit is a violation of the Illinois Vehicle Code and you may be subject to fines and penalties.
4. In case of loss or theft of Temporary Registration Plate, you should immediatley contact your local law enforcement agency and report the loss or theft, then go to a Secretary of State Facility to receive a replacement.

THE CUSTOMER RECEIPT MUST BE CARRIED IN THE VEHICLE AS LONG AS THE TRP PLATE IS BEING DISPLAYED.

Giovannis Auto
815-780-0563

2009 Chevrolet Cobalt

Stock Number: A424
VIN: 1G1AT58H397191834
Engine: I4 2.2L I4

Trim: LT 4dr Sedan
Mileage: 104,404

Color: SILVER
Fuel Type: Gasoline
MPG: 24 city / 33 hwy

Description

Options

Air Filtration, Airbag Deactivation - Occupant Sensing Passenger, Anti-Theft System - Alarm With Engine Immobilizer, Anti-Theft System - Audio Security System, Audio System Features - Radio Data System, Auxiliary Audio Input - Jack, Battery - Maintenance-Free, Body Side Moldings - Body-Color, Cargo Area Light, Center Console - Front Console With Armrest And Storage, Child Safety Locks, Child Seat Anchors - Latch System, Cupholders - Front And Rear, Daytime Running Lights, Door Handle Color - Body-Color, Driver Seat - Height Adjustable, Driver Seat Manual Adjustments - 4, Driver Seat Manual Adjustments - Lumbar, Driver Seat Manual Adjustments - Recline, Emergency Interior Trunk Release, Exhaust Tip Color - Stainless-Steel, Exterior Mirrors - Power, Floor Mat Material - Carpet, Floor Mats - Front And Rear, Front Air Conditioning, Front Air Conditioning Zones - Single, Front Airbags - Dual, Front Brakes - Disc, Front Headrests - 2, Front Headrests - Driver Seat Active Head Restraint, Front Headrests - Height Adjustable, Front Headrests - Passenger Seat Active Head Restraint, Front Seat Type - Bucket, Front Shock Type - Gas Shock Absorbers, Front Spring Type - Coil Springs, Front Wipers - Intermittent, Front Wipers - Speed Sensitive, Grille Color - Black, Headlights - Auto On/Off, Mirror Color - Body-Color, Mp3 Player - Cd Mp3 Playback, Multi-Function Remote - Keyless Entry, Multi-Function Remote - Trunk Release, Multi-Functional Information Center, Passenger Seat Manual Adjustments - Recline, Power Door Locks - Remote, Power Outlet(S) - Two 12v, Power Steering, Power Windows, Radio - Am/Fm, Rear Brakes - Drum, Rear Center Seatbelt - 3-Point, Rear Headrests - 2, Rear Headrests - Height Adjustable, Rear Seat Type - 60-40 Split Bench, Rear Shock Type - Gas Shock Absorbers, Rear Spring Type - Coil Springs, Retained Accessory Power, Satellite Communications - Onstar, Satellite Radio - Xm, Side Curtain Airbags - Front And Rear, Solar-Tinted Glass, Spare Tire Kit - Inflator Kit, Speed Sensitive Volume Control, Stability Control, Steering Wheel - Tilt-Adjustable, Steering Wheel Trim - Urethane, Storage - Seatback, Tachometer, Tire Pressure Monitoring System, Tire Type - All Season, Total Number Of Speakers - 4, Traction Control, Upholstery - Sport Cloth, Vanity Mirrors - Dual, Warnings And Reminders - Lamp Failure, Low Fuel, Engine Oil, Coolant, Wheel Type - Steel, Window Defogger - Rear, Window Defogger - Side

Price:

Was: ~~$7,459~~

Special: $6,995

Information deemed reliable, but not guaranteed. Interested parties should confirm all data before relying on it to make a purchase decision. All prices and specifications are subject to change without notice. Prices may not include additional fees such as government fees and taxes, title and registration fees, finance charges, dealer preparation fees, processing fees, and emission testing and compliance charges.

Visit us online at
www.giovannisautoil.com
Powered by Carsforsale.com

TM

N ME!

IVCU
www.ivcu.com

ILLINOIS VALLEY CREDIT UNION
2107 Marquette Road
Peru, IL 61354
(815) 224-2667
Touch-tone teller 1-800-399-4794
info@ivcu.com

Statement of Account

2 990 1 AV 0.373 0.349 MC 337

337

JULIA EICKMEIER
990 2830 4TH ST TRLR 13
PERU, IL 61354-3171

1

Member Number:	16178003
Start Date:	07/01/17
End Date:	09/30/17
Page:	1 of 1

AUDIT VERFICATION REQUEST - PLEASE EXAMINE YOUR STATEMENT CAREFULLY. IF INCORRECT, PLEASE NOTIFY OUR AUDITORS IN WRITING TO: DESMOND & AHERN, LTD., 10827 S. WESTERN AVE, CHICAGO, IL 60643. IF CORRECT, NO REPLY IS NECESSARY.

LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	2,107.20	1,615.58

LOAN 8003 13.575 <ANNUAL PERCENTAGE RATE>

Date	Amount	Fee	Fin. Charge	Principal Change	Balance	Transaction Description
Jul 01					**2,107.20**	**PREVIOUS BALANCE**
Jul 21	200.00	35.00	32.13	-132.87	1,974.33	PAYMENT
Aug 18	140.00		20.56	-119.44	1,854.89	PAYMENT
Sep 14	257.94		18.63	-239.31	1,615.58	PAYMENT
Sep 30					**1,615.58**	**NEW BALANCE**

YTD FINANCE CHARGES 231.93
.037192% DAILY PERIODIC RATE

SHARE SUMMARY

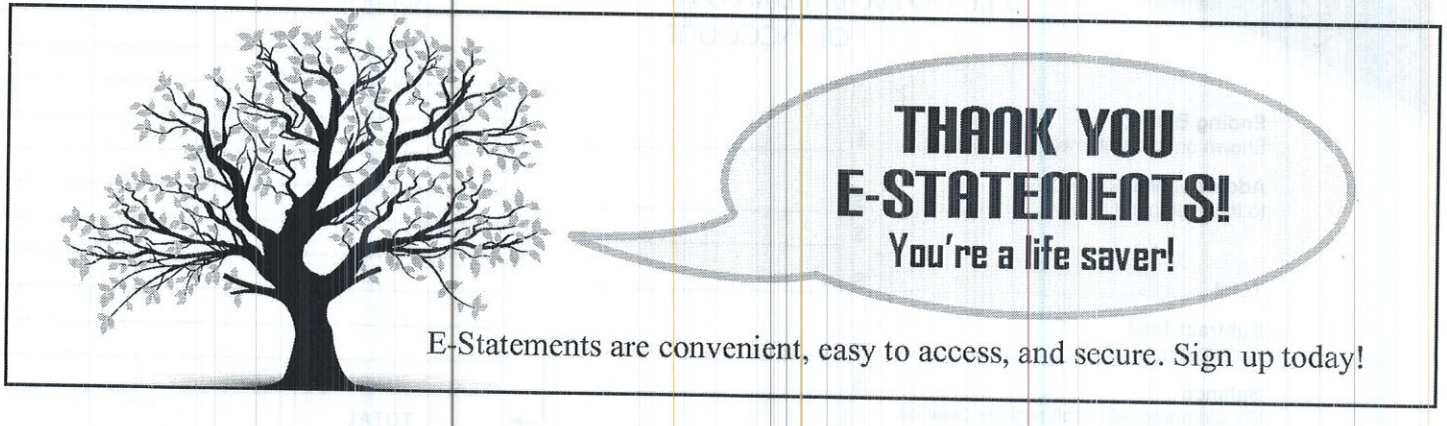
Type	Starting Balance	Total Deposits	Total Withdrawals	Ending Balance
REGULAR SHARES	25.01	0.00	0.00	25.01

REGULAR SHARES

Date	Withdrawal	Deposit	Balance	Transaction Description
Jul 01			**25.01**	**PREVIOUS BALANCE**
Sep 30			**25.01**	**NEW BALANCE**

YEAR-TO-DATE FINANCIAL SUMMARY

DIV/INT PAID	0.00	DIV/INT WITHHOLDING	0.00
MORTGAGE POINTS	0.00	MORTGAGE LATE CHG	0.00
MORTGAGE FINANCE CHG	0.00	OTHER NON-MTG FINANCE CHG	231.93



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Statement of Account

2 901 1 AV 0.373 0.349 MC 337

337

JULIA EICKMEIER
2830 4TH ST TRLR 13
PERU, IL 61354-3171

901

1

Member Number:	16178003
Start Date:	04/01/17
End Date:	06/30/17
Page:	1 of 1

MOBILE BANKING IS NOW NOW AVAILABLE! CALL US FOR DETAILS.

LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	2,564.12	2,107.20

LOAN 8003 13.575 <ANNUAL PERCENTAGE RATE>

Date	Amount	Fee	Fin. Charge	Principal Change	Balance	Transaction Description
Apr 01					**2,564.12**	**PREVIOUS BALANCE**
Apr 04	400.00			-400.00	2,164.12	PAYMENT
Jun 10	163.97	35.00	72.05	-56.92	2,107.20	PAYMENT
Jun 30					**2,107.20**	**NEW BALANCE**

YTD FINANCE CHARGES 160.61
.037192% DAILY PERIODIC RATE

SHARE SUMMARY

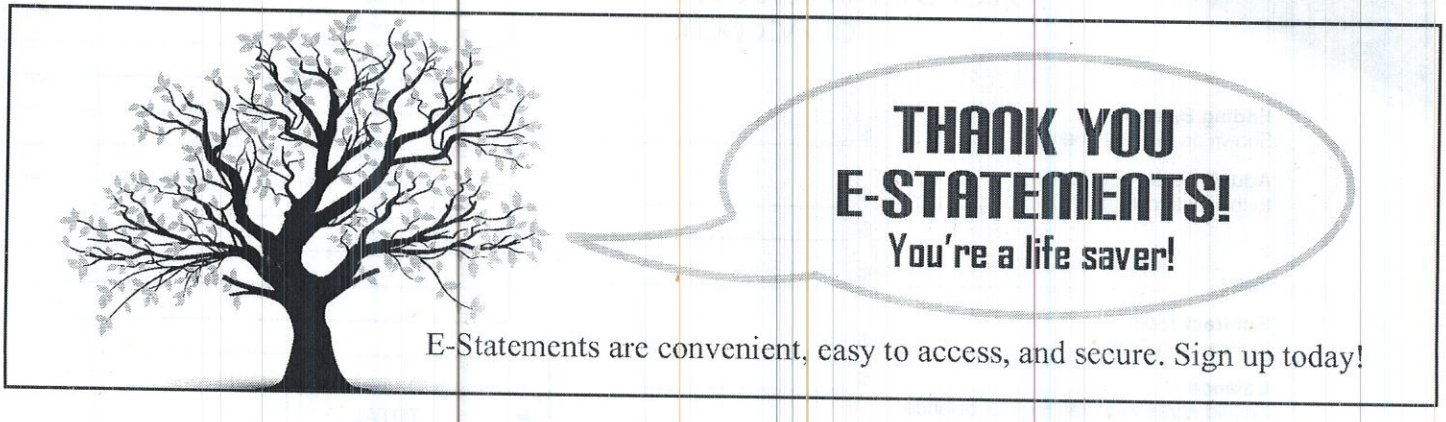
Type	Starting Balance	Total Deposits	Total Withdrawals	Ending Balance
REGULAR SHARES	25.01	0.00	0.00	25.01

REGULAR SHARES

Date	Withdrawal	Deposit	Balance	Transaction Description
Apr 01			**25.01**	**PREVIOUS BALANCE**
Jun 30			**25.01**	**NEW BALANCE**

YEAR-TO-DATE FINANCIAL SUMMARY

DIV/INT PAID	0.00	DIV/INT WITHHOLDING	0.00
MORTGAGE POINTS	0.00	MORTGAGE LATE CHG	0.00
MORTGAGE FINANCE CHG	0.00	OTHER NON-MTG FINANCE CHG	160.61



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Statement of Account

2 911 1 AV 0.373 0.349 MC 337

JULIA EICKMEIER
2830 4TH ST TRLR 13
PERU, IL 61354-3171

911

1

337

Member Number:	16178003
Start Date:	01/01/17
End Date:	03/31/17
Page:	1 of 1

MOBILE BANKING IS NOW NOW AVAILABLE! CALL US FOR DETAILS.

LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	2,980.56	2,564.12

ILLINOIS VALLEY C U
2107 MARQUETTE RD

LATE NOTICE

MEMBER NUMBER	NOTE NO.	CURRENT LOAN BALANCE	DATE DUE	DATE OF LAST TRANSACTION	SCHEDULED PAYMENT
16178003	8003	2,164.12	5-15-17	4-04-17	128.97

PLEASE ENCLOSE THIS NOTICE WITH YOUR PAYMENT

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

AMOUNT
103.20
PAST DUE

TO BRING YOUR ACCOUNT CURRENT, PLEASE PAY THIS

ILLINOIS VALLEY C U
2107 MARQUETTE RD
PERU, IL 61354

LATE NOTICE

CREDIT UNION PHONE	DATE
815-224-2667	5-26-17

JULIA EICKMEIER
2830 4TH ST LOT 13
PERU, IL 61354

FIRST CONTACT:
BORROW@IVCU.COM
OR CALL 815-224-2667
IF YOU NEED TO MAKE
ARRANGEMENTS. WE
ARE HERE TO HELP
WWW.IVCU.COM

IF YOUR PAYMENT WAS
SENT WE THANK YOU.

PAYMENT HAS NOT
BEEN RECIEVED.

IVCU
www.ivcu.com

ILLINOIS VALLEY CREDIT UNION
2107 Marquette Road
Peru, IL 61354
(815) 224-2667
Touch-tone teller 1-800-399-4794
info@ivcu.com

Statement of Account

2 955 1 AV 0.376 0.349 MC 337

337

JULIA EICKMEIER
2830 4TH ST TRLR 13
PERU, IL 61354-3171

955

Member Number:	16178003
Start Date:	04/01/16
End Date:	06/30/16
Page:	1 of 1

ILLINOIS VALLEY CREDIT UNION IS THE BEST PLACE TO

ILLINOIS VALLEY C U
2107 MARQUETTE RD
PERU, IL 61354

CHARLES J TEMPLETON
222 SHOOTING PARK RD
PERU, IL 61354

LATE NOTICE

YOUR LOAN IS IN DEFAULT.
PAYMENT HAS NOT BEEN RECIEVED.

IF YOUR PAYMENT WAS SENT WE THANK YOU.

FIRST CONTACT:
BORROW@IVCU.COM
OR CALL 815-224-2667
IF YOU NEED TO MAKE ARRANGEMENTS. WE ARE HERE TO HELP
WWW.IVCU.COM

ILLINOIS VALLEY C U
2107 MARQUETTE RD
PERU, IL 61354

LATE NOTICE

CREDIT UNION PHONE	DATE
815-224-2667	5-20-16

TO BRING YOUR ACCOUNT CURRENT, PLEASE PAY THIS

AMOUNT
286.82
PAST DUE

CHARLES J TEMPLETON
222 SHOOTING PARK RD
PERU, IL 61354

MEMBER NUMBER	NOTE NO.	CURRENT LOAN BALANCE	DATE DUE	DATE OF LAST TRANSACTION	SCHEDULED PAYMENT
16135005	021613	7,389.15	5-10-16	4-20-16	286.91

PLEASE ENCLOSE THIS NOTICE WITH YOUR PAYMENT

E-Statements are convenient, easy to access, and secure. Sign up today!

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Statement of Account

2 931 1 AV 0.376 0.349 MC 337

337

JULIA EICKMEIER
931
2830 4TH ST TRLR 13
PERU, IL 61354-3171

1

Member Number:	16178003
Start Date:	10/01/16
End Date:	12/31/16
Page:	1 of 1

MOBILE BANKING IS NOW NOW AVAILABLE! CALL US FOR DETAILS.

LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	3,397.54	2,980.56

LOAN 8003 13.575 <ANNUAL PERCENTAGE RATE>

Date	Amount	Fee	Fin. Charge	Principal Change	Balance	Transaction Description
Oct 01					3,397.54	PREVIOUS BALANCE
Dec 22	523.00			-523.00	2,874.54	PAYMENT
Dec 22	515.88	35.00	152.90	-327.98	2,546.56	PAYMENT
Dec 22				434.00	2,980.56	REPO FEES
Dec 31					2,980.56	NEW BALANCE

YTD FINANCE CHARGES 499.08
.037192% DAILY PERIODIC RATE

SHARE SUMMARY

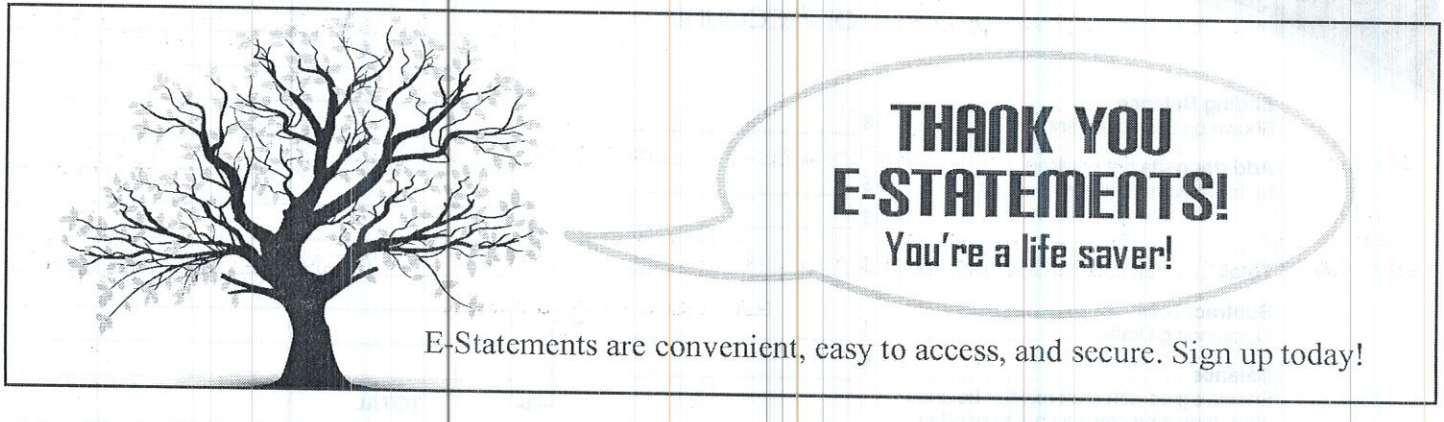
Type	Starting Balance	Total Deposits	Total Withdrawals	Ending Balance
REGULAR SHARES	25.01	0.00	0.00	25.01

REGULAR SHARES

Date	Withdrawal	Deposit	Balance	Transaction Description
Oct 01			25.01	PREVIOUS BALANCE
Dec 31			25.01	NEW BALANCE

YEAR-TO-DATE FINANCIAL SUMMARY

DIV/INT PAID	0.02	DIV/INT WITHHOLDING	0.00
MORTGAGE POINTS	0.00	MORTGAGE LATE CHG	0.00
MORTGAGE FINANCE CHG	0.00	OTHER NON-MTG FINANCE CHG	499.08



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Peru, IL 61354
(815) 224-2667
Touch-tone teller 1-800-399-4794
info@ivcu.com

Statement of Account

3 960 1 AV 0.391 0.6526 MC 337 337

JULIA EICKMEIER
2830 4TH ST TRLR 13
PERU, IL 61354-3171

Member Number:	16178003
Start Date:	04/01/15
End Date:	06/30/15
Page:	1 of 1

LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	4,612.36	4,299.40

LOAN 8003 13.575 <ANNUAL PERCENTAGE RATE>

Date	Amount	Fee	Fin. Charge	Principal Change	Balance	Transaction Description
Apr 01					**4,612.36**	**PREVIOUS BALANCE**
Apr 11	140.00	35.00	43.49	-61.51	4,550.85	PAYMENT
May 15	136.00	35.00	57.55	-43.45	4,507.40	PAYMENT
Jun 18	300.00	35.00	57.00	-208.00	4,299.40	PAYMENT
Jun 30					**4,299.40**	**NEW BALANCE**

YTD FINANCE CHARGES 316.40
.037192% DAILY PERIODIC RATE

SHARE SUMMARY

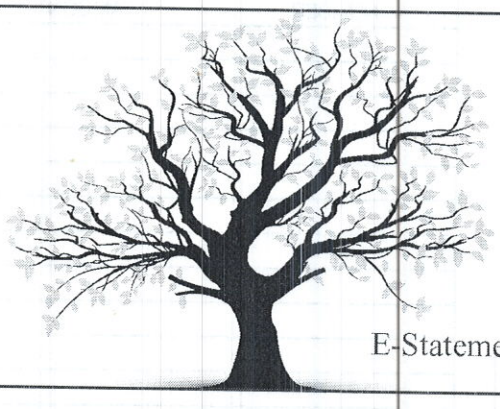
Type	Starting Balance	Total Deposits	Total Withdrawals	Ending Balance
REGULAR SHARES	74.02	0.02	0.00	74.04

REGULAR SHARES

Date	Withdrawal	Deposit	Balance	Transaction Description
Apr 01			**74.02**	**PREVIOUS BALANCE**
Jun 30		0.02	74.04	DIVIDEND EARNED 04-01-15 THRU 06-30-15
				.11 ANNUAL PERCENTAGE YIELD EARNED 04-01-15 THRU 06-30-15
Jun 30			**74.04**	**NEW BALANCE**

YEAR-TO-DATE FINANCIAL SUMMARY

DIV/INT PAID	0.04	DIV/INT WITHHOLDING	0.00
MORTGAGE POINTS	0.00	MORTGAGE LATE CHG	0.00
MORTGAGE FINANCE CHG	0.00	OTHER NON-MTG FINANCE CHG	316.40



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Statement of Account

3 958 1 AV 0.391 0.6526 MC 337

337

JULIA EICKMEIER
2830 4TH ST TRLR 13
PERU, IL 61354-3171

958

1

Member Number:	16178003
Start Date:	07/01/15
End Date:	09/30/15
Page:	1 of 1

AUDIT VERIFICATION REQUEST - PLEASE EXAMINE STATEMENT CAREFULLY. IF INCORRECT, NOTIFY OUR AUDITORS IN WRITING: DESMOND AND AHERN, LTD, 10827 S. WESTERN, CHICAGO, IL 60643 IF CORRECT, NO REPLY IS NECESSARY. THANK YOU

LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	4,299.40	4,021.86

LOAN 8003 13.575 <ANNUAL PERCENTAGE RATE>

Date	Amount	Fee	Fin. Charge	Principal Change	Balance	Transaction Description
Jul 01					4,299.40	PREVIOUS BALANCE
Aug 10	150.00		84.75	-65.25	4,234.15	PAYMENT
Aug 31	62.00		33.07	-28.93	4,205.22	PAYMENT
Sep 10	199.00		15.64	-183.36	4,021.86	PAYMENT
Sep 30					4,021.86	NEW BALANCE

YTD FINANCE CHARGES 449.86
.037192% DAILY PERIODIC RATE

SHARE SUMMARY

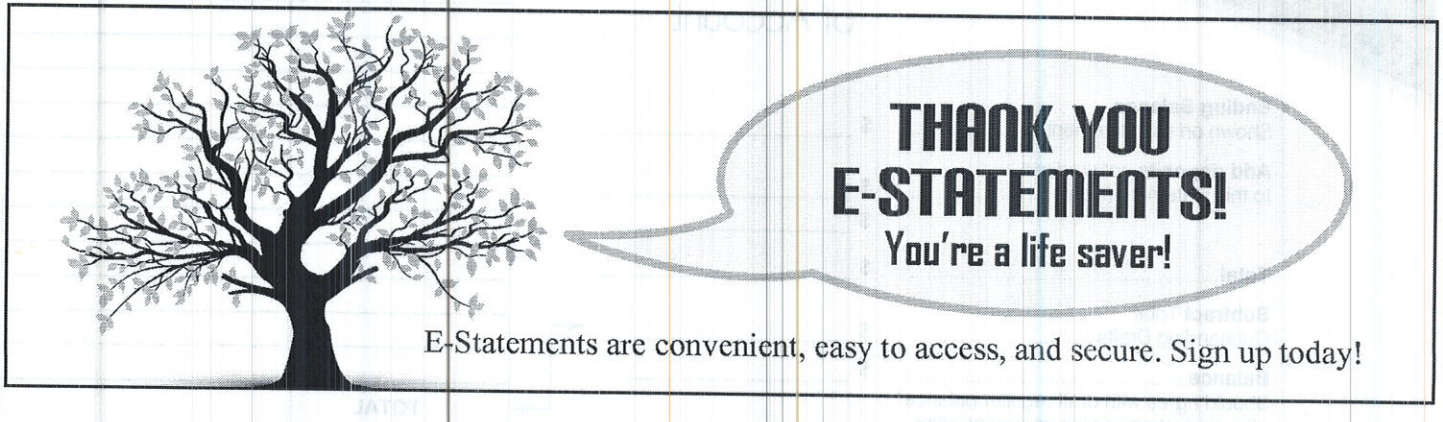
Type	Starting Balance	Total Deposits	Total Withdrawals	Ending Balance
REGULAR SHARES	74.04	0.02	0.00	74.06

REGULAR SHARES

Date	Withdrawal	Deposit	Balance	Transaction Description
Jul 01			74.04	PREVIOUS BALANCE
Sep 30		0.02	74.06	DIVIDEND EARNED 07-01-15 THRU 09-30-15
				.11 ANNUAL PERCENTAGE YIELD EARNED 07-01-15 THRU 09-30-15
Sep 30			74.06	NEW BALANCE

YEAR-TO-DATE FINANCIAL SUMMARY

DIV/INT PAID	0.06	DIV/INT WITHHOLDING	0.00
MORTGAGE POINTS	0.00	MORTGAGE LATE CHG	0.00
MORTGAGE FINANCE CHG	0.00	OTHER NON-MTG FINANCE CHG	449.86



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LOAN NUMBER	LOAN NAME	ACCT. NUMBER	NOTE DATE	INITIALS
8003	Julia C Eickmeier	16178003	12/15/14	804028
NOTE AMOUNT	**INDEX (w/Margin)**	**RATE**	**MATURITY DATE**	**LOAN PURPOSE**
$4,756.00	Not Applicable	13.575%	12/15/18	Consumer
		Creditor Use Only		

PROMISSORY NOTE, SECURITY AGREEMENT AND TRUTH-IN-LENDING DISCLOSURES

(Consumer - Closed End)

DATE AND PARTIES. The date of this Promissory Note, Security Agreement and Truth-In-Lending Disclosures (Loan Agreement) is December 15, 2014. The parties and their addresses are:

LENDER:
ILLINOIS VALLEY CREDIT UNION
2107 Marquette Rd
Peru, IL 61354-1539
Telephone: (815) 224-2667

BORROWER:
JULIA C EICKMEIER
2830 4th Street #13
Peru, IL 61354

GORDON PEARSON
2830 4th Street
Peru, IL 61354

The pronouns "I," "me," and "my" refer to each Borrower signing this Loan Agreement, individually and together. "You" and "Your" refer to the Lender. Loan Documents refer to all the documents executed as a part of or in connection with the Loan. Property means any property, real, personal or intangible, that secures my performance of the obligations of this Loan Agreement. Rates and rate change limitations are expressed as annualized percentages. All dollar amounts will be payable in lawful money of the United States of America.

ANNUAL PERCENTAGE RATE	FINANCE CHARGE	AMOUNT FINANCED	TOTAL OF PAYMENTS
The cost of my credit as a yearly rate.	The dollar amount the credit will cost me.	The amount of credit provided to me or on my behalf.	The amount I will have paid when I have made all scheduled payments.
13.584%	**$1,434.78**	**$4,756.00**	**$6,190.78**

Payment Schedule. My payment schedule will be:

Number of Payments	Amount of Payments	When Payments Are Due
47	$128.97	Monthly beginning January 15, 2015
1	$129.19	December 15, 2018

Security. I am giving a security interest in:

Motor Vehicle (Non-Residence)

Late Charge. If a payment is more than **7** days late, I will be charged **$35.00.**
Prepayment. If I pay off early, I will not have to pay a minimum finance charge.
Assumption. Someone buying the Property securing the obligation cannot assume the remainder of the obligation on the original terms.
Contract Documents. I will see my contract documents for any additional information about nonpayment, default, any required repayment in full before the scheduled date, and prepayment refunds and penalties.

1. PROMISE TO PAY. For value received, I promise to pay you or your order the principal sum of **$4,756.00 (Principal)** plus interest at the rate of **13.575 percent (Interest Rate)** from December 15, 2014 on the unpaid Principal balance until this Loan Agreement matures or this obligation is accelerated.

After maturity or acceleration, interest will accrue on the unpaid Principal balance of this Loan Agreement at the Interest Rate in effect from time to time, until paid in full. Any amount assessed or collected as interest under the terms of this Loan Agreement will be limited to the maximum lawful amount of interest allowed by state or federal law, whichever is greater. Amounts collected in excess of the maximum lawful amount will be applied first to the unpaid Principal balance. Any remainder will be refunded to me. The amount assessed or collected on this Loan Agreement is authorized by the Illinois usury laws under 815 ILCS 205. Interest accrues using an Actual/365 days counting method.

2. REMEDIAL CHARGES. In addition to interest or other finance charges, I agree that I will pay these additional fees based on my method and pattern of payment. Additional remedial charges may be described elsewhere in this Loan Agreement.

A. Late Charge. If a payment is more than **7** days late, I will be charged **$35.00.** I will pay this late charge promptly but only once for each late payment.

A. Payments and Performance. I fail to make a payment when due or perform any condition or keep any promise or covenant of this or any agreement I have made with you.

B. Insolvency or Bankruptcy. I become insolvent or declare bankruptcy.

C. Death or Incompetency. I die or am declared legally incompetent.

9. DUE ON SALE OR ENCUMBRANCE. You may, at your option, declare the entire balance of this Loan Agreement to be immediately due and payable upon the creation of, or contract for the creation of, any lien, encumbrance, transfer or sale of all or any part of the Property. This right is subject to the restrictions imposed by federal law, as applicable.

10. WAIVERS AND CONSENT. To the extent not prohibited by law, I waive protest, presentment for payment, demand, notice of acceleration, notice of intent to accelerate and notice of dishonor. In addition, I, to the extent permitted by law, consent to certain actions you may take, and generally waive defenses that may be available based on these actions or based on the status of a party to this Loan Agreement. You may renew or extend payments on this Loan Agreement, regardless of the number of such renewals or extensions. You may release any Borrower, endorser, guarantor, surety, accommodation maker or any other co-signer. You may release, substitute or impair any Property securing this Loan Agreement. You, or any institution participating in this Loan Agreement, may invoke your right of set-off. You may enter into any sales, repurchases or participations of this Loan Agreement to any person in any amounts and I waive notice of such sales, repurchases or participations. I agree that any of us signing this Loan Agreement as a Borrower is authorized to modify the terms of this Loan Agreement or any instrument securing, guarantying or relating to this Loan Agreement. Except to the extent prohibited by law, I waive all claims for loss or damage caused by your acts or omissions where you acted reasonably and in good faith.

11. REMEDIES. After I default, and after you give any legally required notice and opportunity to cure the default, you may at your option do any one or more of the following.

A. Acceleration. You may make all or any part of the amount owing by the terms of this Loan Agreement immediately due.

B. Sources. You may use any and all remedies you have under state or federal law or in any Loan Document.

C. Insurance Benefits. You may make a claim for any and all insurance benefits or refunds that may be available on my default.

D. Payments Made On My Behalf. Amounts advanced on my behalf will be immediately due and may be added to the balance owing under the terms of this Loan Agreement, and accrue interest at the highest post-maturity interest rate.

E. Attachment. You may attach or garnish my wages or earnings.

F. Set-Off. You may set-off any amount due and payable under the terms of this Loan Agreement against my right to receive money from you, unless prohibited by applicable law. In addition, you may, without further notice, impress and enforce any statutory lien on my shares and dividends to the extent of any sums due and payable under the terms of this Agreement that I fail to satisfy, unless prohibited by applicable law.

G. Repossession. You may require me to gather and make the Property available to you. You may repossess the Property so long as the repossession does not involve a breach of the peace. You may sell, lease or otherwise dispose of the Property as provided by law. You may apply what you receive from the disposition of the Property to your expenses, your attorneys' fees and legal expenses (where not prohibited by law), and any debt I owe you. If what you receive from the disposition of the Property does not satisfy the debt, I will be liable for the deficiency (where permitted by law). In some cases, you may keep the Property to satisfy the debt.

Where a notice is required, I agree that ten days prior written notice sent by first class mail to my address listed in this Loan Agreement will be reasonable notice to me under the Illinois Uniform Commercial Code.

H. Use and Operation. You may enter upon my premises and take possession of all or any part of my property for the purpose of preserving the Property or its value, so long as you do not breach the peace. You may use and operate my property for the length of time you feel is necessary to protect your interest, all without payment or compensation to me.

I. Waiver. Except as otherwise required by law, by choosing any one or more of these remedies you do not give up your right to use any other remedy. You do not waive a default if you choose not to use a remedy. By electing not to use any remedy, you do not waive your right to later consider the event a default and to use any remedies if the default continues or occurs again.

12. COLLECTION EXPENSES AND ATTORNEYS' FEES. On or after the occurrence of an Event of Default, to the extent permitted by law, I agree to pay all expenses of collection, enforcement or protection of your rights and remedies under this Loan Agreement or any other Loan Document. Expenses include reasonable attorneys' fees. These expenses are due and payable immediately. If not paid immediately, these expenses will bear interest from the date of payment until paid in full at the highest interest rate in effect as provided for in the terms of this Loan Agreement. All fees and expenses will be secured by the Property I have granted to you, if any. In addition, to the extent permitted by the United States Bankruptcy Code, I agree to pay the reasonable attorneys' fees incurred by you to protect your rights and interests in connection with any bankruptcy proceedings initiated by or against me.

13. COMMISSIONS. I understand and agree that you (or your affiliate) will earn commissions or fees on any insurance products, and may earn such fees on other services that I buy through you or your affiliate.

14. WARRANTIES AND REPRESENTATIONS. I have the right and authority to enter into this Loan Agreement. The execution and delivery of this Loan Agreement will not violate any agreement governing me or to which I am a party.

15. INSURANCE. I agree to obtain the insurance described in this Loan Agreement.

A. Property Insurance. I agree to keep the Property insured against the risks reasonably associated with the Property. I will maintain this insurance in the amounts you require. This insurance will last until the Property is released from this Loan Agreement. I may choose the insurance company, subject to your approval, which will not be unreasonably withheld.

I will have the insurance company name you as loss payee on any insurance policy. I will give you and the insurance company immediate notice of any loss. You may apply the insurance proceeds toward what is owed on the Secured Debts. You may require added security as a condition of permitting any insurance proceeds to be used to repair or replace the Property.

If you acquire the Property in damaged condition, my right to any insurance policies and proceeds will pass to you to the extent of the Secured Debts.

I will immediately notify you of cancellation or termination of insurance. If I fail to keep the Property insured, you may obtain insurance to protect your interest in the Property and I will pay for the insurance on your demand. You may demand that I pay for the insurance all at once, or you may add the insurance premiums to the balance of the Secured Debts and charge interest on it at the rate that applies to the Secured Debts. This insurance may include coverages not originally required of me, may be written by a company other than one I would choose, and may be written at a higher rate than I could obtain if I purchased the insurance. I acknowledge and agree that you or one of your affiliates may receive commissions on the purchase of this insurance.

16. COLLATERAL PROTECTION INSURANCE NOTICE. Unless I provide you with evidence of the insurance coverage required by my agreement with you, you may purchase insurance at my expense to protect your interests in my collateral. This insurance may, but need not, protect my interests. The coverage that you purchase may not pay any claim that I make or any claim that is made against me in connection with the collateral. I may later cancel any insurance purchased by you, but only after providing you with evidence that I have obtained insurance as required by our agreement. If you purchase insurance for the collateral, I will be

LENDER:

Illinois Valley Credit Union

By_____ Date_____
Linda A. Kreiser, Vice President

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NOTICE REGARDING INACCURATE INFORMATION

As a participant in the consumer reporting system, we furnish information about our experience with you to consumer reporting agencies. These consumer reports allow us to make credit and other opportunities available to you. If you believe that we have furnished information to a consumer reporting agency that is inaccurate please notify us at the following address and identify the specific information that is inaccurate.

Illinois Valley Credit Union

2107 Marquette Rd
Peru, Illinois 61354

(815) 224-2667

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WMRX CHECK DISBURSED 03/16/16 02:51 PM 14289 1/1 LMW 0215 BR0002
V/C#: 42500708

82875 JULIA C EICKMEIER EFF DATE:03/16/16

CASH RECVD: 200.00 CHECK RECVD: 0.00 TOTL RECVD: 200.00
CASH RETURNED: 0.00 CK#: 42500708
CHECK RET: 198.00 TO: JULIA C EICKMEIER

SFX	TRAN	AMOUNT	FEE	BALANCE
0S	RFT	2.00	0.00	

NOTES
PAYEE: IV credit union

JULIA C EICKMEIER
2830 4TH ST LOT 13
PERU IL 61354

MEMO:

MONEY ORDER AMOUNT: 198.00

This money order becomes void 90 days after the date of issuance. If this money order is not presented for payment by the credit union within six months after the date of issuance, funds will automatically be re-deposited to the purchasers account. A money order not presented for payment prior to six months from the date of issuance may be replaced only upon presentation of the original money order, or upon issuance of a stop payment order. There is a $20 fee to place a stop payment. A stop payment order does not automatically relieve the purchaser of this money order of the obligation to the payee for the payment of funds.

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(815) 224-2667
Touch-tone teller 1-800-399-4794
info@ivcu.com

Princeton Branch:
200 Ace Road, Suite 1
Princeton, IL 61356
815-875-3400

Your savings federally insured to at least $250,000 and backed by the full faith and credit of the United States Government
NCUA
National Credit Union Administration, a U.S. Government Agency

OTHER THAN HOME-EQUITY PLANS

What To Do If You Think You Find A Mistake on Your Statement

(UNLESS OTHERWISE NOTED, AN * OR ** IDENTIFIES AN OPEN END LOAN)

If you think there is an error on your statement, write to us at the Peru address on the front of the first page of this statement. In your letter, give us the following information:

- Account information: Your name and account number.
- Dollar amount: The dollar amount of the suspected error.
- Description of Problem: If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement. You must notify us of any potential errors in writing. You may call us, but if you do, we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

HOME-EQUITY PLANS BILLING RIGHTS SUMMARY

In Case of Errors or Questions About Your Bill: If you think your bill is wrong, or if you need more information about a transaction on your bill, write us at the Peru address on the front of the first page of this statement, as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter, give us the following information:

1. Your name and account number.
2. The dollar amount of the suspected error.
3. Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

Important Information Regarding the Computation of your Consumer Loan Balance and Finance Charges: The finance charge is calculated on open end loans by applying the Daily Periodic Rate to the unpaid principal balance for the actual number of days such balance remains outstanding. To get the unpaid principal balance we take the beginning balance of your account each day, add any new advances, and subtract any payments or credits. This gives us the unpaid principal balance for that day. The finance charges are collected at the time of a payment. The Annual Percentage Rate (APR) is shown in the loan description area for each loan followed by the rate type. Types of "Adjust" or "Variable" indicate that this loan's APR can change. The Daily Periodic Rate is calculated by dividing the APR by 360 or 365 as noted in your disclosures.

REGULATION E (ELECTRONIC FUND TRANSFERS) SUMMARY OF YOUR RIGHTS

In Case of Errors or Questions About Your Electronic Transfers: Call or write us at the phone number or Peru address listed on the front of the first page of this statement as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the **FIRST** statement on which the error or problem appeared.

(1) Tell us your name and account number (if any).

(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

(3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days in MA) to do this, we will credit your account for the amount you think is in error so that you will have the use of the money during the time it takes us to complete our investigation.

You may call the designated phone number on the front of this statement to determine if pre-authorized transfers have occurred.

Certain exempt loans and accounts are not provided with customer protection under Regulation Z and Regulation E. Contact us for specific information, should you have a question pertaining to your accounts.

Reconciliation of Account

Ending Balance
Shown on this statement ..... $ _____

Add deposits not credited
to this statement (if any) ..... $ _____

$ _____

Total ..... $ _____

Subtract Total
Outstanding Drafts ..... $ _____

Balance ..... $ _____
Should agree with draft register balance after deducting service charge or other charges not in your draft register (if any)

OUTSTANDING SHARE DRAFTS

NUMBER	AMOUNT	
TOTAL		

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(815) 224-2667
Touch-tone teller 1-800-399-4794
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Statement of Account

3 954 1 AV 0.391 0.653 MC 337

337

JULIA EICKMEIER
2830 4TH ST TRLR 13
PERU, IL 61354-3171

954

1

Member Number:	16178003
Start Date:	01/01/16
End Date:	03/31/16
Page:	1 of 1

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LOAN SUMMARY

Type	Starting Balance	Ending Balance
LOAN	3,924.44	3,657.42

LOAN 8003 13.575 <ANNUAL PERCENTAGE RATE>

Date	Amount	Fee	Fin. Charge	Principal Change	Balance	Transaction Description
Jan 01					3,924.44	PREVIOUS BALANCE
Jan 19	125.00		48.17	-76.83	3,847.61	PAYMENT
Feb 16	76.00		40.07	-35.93	3,811.68	PAYMENT
Feb 16	1.61			-1.61	3,810.07	LN PMT TRANSF
Mar 19	198.00		45.35	-152.65	3,657.42	PAYMENT
Mar 31					3,657.42	NEW BALANCE

YTD FINANCE CHARGES 133.59
.037192% DAILY PERIODIC RATE

SHARE SUMMARY

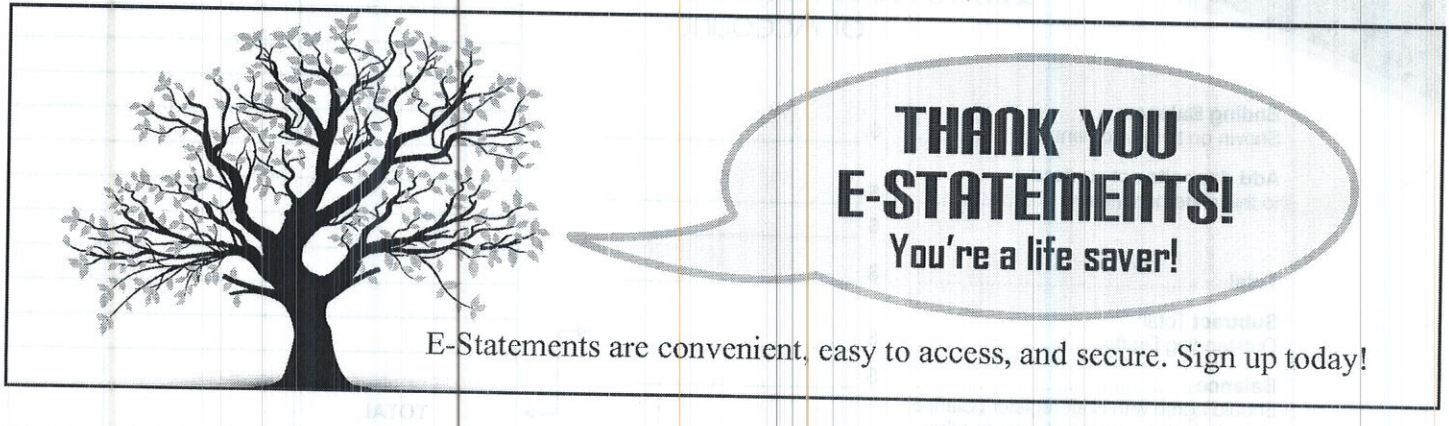
Type	Starting Balance	Total Deposits	Total Withdrawals	Ending Balance
REGULAR SHARES	74.07	0.01	1.61	72.47

REGULAR SHARES

Date	Withdrawal	Deposit	Balance	Transaction Description
Jan 01			74.07	PREVIOUS BALANCE
Feb 16	-1.61		72.46	LN PMT TRANSF
Mar 31		0.01	72.47	DIVIDEND EARNED 01-01-16 THRU 03-31-16
				.05 ANNUAL PERCENTAGE YIELD EARNED 01-01-16 THRU 03-31-16
Mar 31			72.47	NEW BALANCE

YEAR-TO-DATE FINANCIAL SUMMARY

DIV/INT PAID	0.01	DIV/INT WITHHOLDING	0.00
MORTGAGE POINTS	0.00	MORTGAGE LATE CHG	0.00
MORTGAGE FINANCE CHG	0.00	OTHER NON-MTG FINANCE CHG	133.59



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prepared for:
Julia C Eickmeier

contents:
Activation Form —
Please return within 14 days
Summary of Benefits —
Retain for your records

Julia C Eickmeier
2830 4th St Trlr 13
Peru, IL 61354-3171

0079

Member Document Pack

Attention **Julia C Eickmeier**:

The documents enclosed herein are being sent to you because —

(1) **Financial Plus Credit Union has paid in full for you to receive $1,000 of insurance through Minnesota Life Insurance Company.** This means that if you have a fatal accident, your beneficiary will receive a $1,000 cash benefit. You have no cost or obligation for this basic Accidental Death and Dismemberment (AD&D) coverage. However, it cannot go into effect until you complete and return the following form.

(2) **You also have the right to use this form to add up to $300,000 more of this coverage regardless of your health.** This added insurance is yours upon request for $1.00 a month per $10,000 of protection. So you can help make sure your family has the money they'll need if they suddenly find themselves without you.

But please make sure your form is completed and returned **within 14 days**.

Activation Form

Minnesota Life Insurance Company
Accidental Death & Dismemberment Insurance Request

Julia C Eickmeier
2830 4th St Trlr 13, Peru, IL 61354-3171

801332012799 EICKM7 G9RG340 S E

Please respond within 14 days

☑ **YES, I accept the $1,000 of insurance coverage benefit, paid for me by Financial Plus Credit Union, by signing below and mailing this form.**

Also, please increase my coverage. I am eligible for up to $300,000 protection.
(Yours for an affordable $1.00 a month per $10,000 of additional coverage. Plus you also get the $1,000 of coverage paid by Financial Plus Credit Union.) All Coverage reduces by 50% at age 70 and older, regardless of age at enrollment.

Please select your coverage level. Acceptance guaranteed up to $300,000.
(Check one box only):

- ☐ **$300,000 (Recommended)**
- ☐ $150,000
- ☐ $100,000
- ☐ $50,000

Choose Family or Single Coverage:
When neither box is selected, you will receive single coverage. The family plan protects spouse and children at a percentage of your coverage amount. See additional coverage rate schedule in the enclosed letter for monthly costs. Please check one:

- ☐ **Family** (Covers you, your spouse and dependent children)
- ☐ **Single** (Covers you alone)

Beneficiary (please print clearly): _____

Relationship to you: _____

Charge Authorization. Yes! Please enroll me in the Accidental Death & Dismemberment Insurance Plan underwritten by Minnesota Life Insurance Company. I have read, understand and agree to all disclosures provided, and I verify that I am at least age 18. I authorize my financial institution and its service provider to automatically charge my account quarterly according to the rate schedule for any additional coverage I select. My payment authorization will remain in effect until the Plan Administrator has received and has had reasonable time to act on my request to cancel by telephone at 1-877-309-6576. Coverage begins on the Effective Date stated on the schedule, provided the first premium is paid and received by Minnesota Life Insurance Company.

SEND NO MONEY NOW. Simply sign and mail this form today.

Signature: _____ **Date:** _____

Must be signed by one of the addressees above.
For joint accounts, signer will be the primary insured. Must be age 18 or older.

A 0003 0079 26942 V001 00001 4868.70137 G9RG34
05-50276

MINNESOTA LIFE
Insurance provided by Minnesota Life Insurance Company
St. Paul, Minnesota 55101-2098

Robert J. Dudacek, Licensed Agent #972576
AC55U2M1242 (R07/15) A04528-0814

W-91509-A
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Thank you for returning your completed Activation Form promptly.
Your Certificate/Policy of Insurance will be delivered to the verified address above.

IVCU Illinois Valley Credit Union
2107 Marquette Rd
Peru, IL 61356
815-224-2666 Fax 815-224-8534

Demand for Payment/Notice of Default
This is a demand. Your failure to act will create consequences.

Your loan is in default which means that all communication must be in **writing**, not a phone call.
borrow@ivcu.com www.ivcu.com loan help text 815-200-6828

Julia Eickmeier and Gordon Pearson
2830 4th St Lot 13
Peru, IL 61354

Friday, July 21, 2017

Dear Member:

Your loan 16178003 is in default due to a breach of a covenant in the loan.
The breach is failure to make payments as agreed in the loan contract.

You must pay $197.17.

You must make payment immediately within 10 days of the date of this notice.

Failure to pay the amount owed on or before ten days of this notice may result in acceleration of the sums secured note, repossession of collateral secured by this loan or cross collateralized by any other loan and/or civil proceeding. You may surrender the collateral by contacting the lender.

Illinois Valley Credit Union reserves the right to accelerate collection and repossession action immediately for any reason before the full amount owed is received at any time.

Illinois Valley Credit Union
borrow@ivcu.com
815-224-2666 x 250

Appointments necessary to discuss this matter

2009 Chevrolet Cobalt If you have a vehicle which is collateralized or cross collateralized as security to any of all loans from Illinois Valley Credit Union, please remove all personal property from the vehicles prior to repossession, which may occur when you become delinquent. Illinois Valley Credit Union uses **R&R Recovery** to repossess collateral. This cost is approximately $500 and will be added to the amount you owe. You may surrender the collateral and avoid this charge; please bring the collateral to 2107 Marquette Rd. Peru, IL and place the keys in night drop if after business hours. **The vehicle** will be sold within 21 days of repossession.

If you have circumstances you wish to discuss please contact the Credit Union. Email borrow@ivcu.com or mail us at the address above. Appearing at the credit union during regular business hours without an appointment assures that the best and most appropriate person will be unlikely to assist you. Appointments are needed. Your failure to make the payments as specified in the contract will allow us to take actions specified in the promissory note.

If you are injured, or on disability please make a claim on your loan payment protection coverage.

If you have a vehicle, please remove any personal property.

Your loan is in default which means that all communication must be in writing, not a telephone call.
borrow@ivcu.com www.ivcu.com loan help text 815-200-6828